

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY 25 PM 12: 23

DOCUMENT # **S33346** (5)

1. Corporation Name
DYNAMIC TOURS AND TRANSPORTATION, INC.

Principal Place of Business Mailing Address
DYNAMIC TOURS & TRAN, INC. PO BOX 691164
7131 GRAND NATL. DR. STE. 107 ORLANDO FL 32669-1164
ORLANDO FL 32819 US
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **02/21/1991** 3a. Date of Last Report **10/05/1994**

2. Principal Place of Business 2a. Mailing Address

21 26

4. FEI Number **59-3096397** Applied For Not Applicable

Suite, Apt. #, etc. Suite, Apt. #, etc.

5. Certificate of Status Desired \$8.75 Additional Fee Required

22 27

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

23 28

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

City & State City & State

24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DAKKAK, ASSAD S.
4864 SPRING RUN AVE.
ORLANDO FL 32819

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAKKAK, ASSAD S.	1 2 NAME	
STREET ADDRESS	4864 SPRING RUN AVE	1 3 STREET ADDRESS	
CITY - ST - ZIP	ORLANDO FL	1 4 CITY - ST - ZIP	
TITLE	V	2 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAKKAK, EDNA S.	2 2 NAME	
STREET ADDRESS	4864 SPRING RUN AVE	2 3 STREET ADDRESS	
CITY - ST - ZIP	ORLANDO FL	2 4 CITY - ST - ZIP	
TITLE		3 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3 2 NAME	
STREET ADDRESS		3 3 STREET ADDRESS	
CITY - ST - ZIP		3 4 CITY - ST - ZIP	
TITLE		4 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4 2 NAME	
STREET ADDRESS		4 3 STREET ADDRESS	
CITY - ST - ZIP		4 4 CITY - ST - ZIP	
TITLE		5 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		5 3 STREET ADDRESS	
CITY - ST - ZIP		5 4 CITY - ST - ZIP	
TITLE		6 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6 2 NAME	
STREET ADDRESS		6 3 STREET ADDRESS	
CITY - ST - ZIP		6 4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Edna Dakkak
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Edna Dakkak

5/19/95 407-351-7777
DATE INITIAL FEE \$