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**Apr 21, 1999 8:00 am**  
**Secretary of State**

04-21-1999 90020 025 \*\*\*150.00



PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # **V41647**

1. Corporation Name  
**ADVENTURE CONNECTIONS, INC.**

Principal Place of Business: 1820 SW 14 CT, FT LAUDERDALE FL 33312  
 Mailing Address: 1820 SW 14 CT, FT LAUDERDALE FL 33312



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business (21-24)  
 2a. Mailing Address (25-28)  
 Suite, Apt. #, etc. (22, 27)  
 City & State (23, 28)  
 Zip (24, 29) Country (25, 30)

3. Date Incorporated or Qualified: **06/04/1992**  
 4. FEI Number: **65-0405200** Applied For:  Not Applicable:   
 5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
 6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
 8. This corporation owes the current year Intangible Personal Property Tax:  Yes  No

9. Name and Address of Current Registered Agent  
**KAMMERER, DANIEL**  
 1820 SW 14 CT  
 FT LAUDERDALE FL 33312

10. Name and Address of New Registered Agent  
 81 Name: **SEWARD, GREGORY**  
 82 Street Address (P.O. Box Number is Not Acceptable): **1555 SW 21 TER**  
 83  
 84 City: **FT. LAUDERDALE** FL 85 Zip Code: **33312**

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: *Greg Seward* DATE: **4/12/99**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS  
 TITLE: **PT**  DELETE  
 NAME: **SEWARD, GREGORY O**  
 STREET ADDRESS: **1820 SW 14TH CT. FT. LAUD.**  
 CITY-ST-ZIP: **FT. LAUDERDALE FL 33312**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
 1.1 TITLE: **PT**  Change  Addition  
 1.2 NAME: **SEWARD GREGORY**  
 1.3 STREET ADDRESS: **1555 SW 21 TER**  
 1.4 CITY-ST-ZIP: **FT. LAUDERDALE FL 33312**

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE: *Greg Seward* **REQUIRED** DATE: **4/12/99** DAYTIME PHONE #: **(954) 797-9343**  
Signature and typed or printed name of signing officer or director

CR2E034 (1/1/98)