## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

Principal Place of Business

DOCUMENT # F74835

(2)

Mailing Address

ALLABOARD TRAVEL AGENCY, INC.

May 01 1	1997	8:00am
Secreta	ry of	State

**FILED** 

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Country   Suit   Pick   Suit   Pick	MCMILLIAN. JAN 2000 N. DIXIE HWY. #8 LAKE WORTH FL 33460		MCMILLIAN. JAN 2000 N. Dixie Hwy. #8 Lake worth fl 33480-8244			
Suito, April #, etc.						3a. Date of Last Report 04/15/1996
Suite, Apt #, etc.    Suite, Apt #, etc.   Suite, Apt #, etc.   S. Certificate of Status Desired   Fee Required City & Status   Status Desired Certification Campaign Financing   Trust Fund Certification and Status   Status Desired   Fee Required City   Fee Peeple City	2. Principa	al Place of Business	2a. Mailing Address			Applied For
Coy & State    Coy & State   C					65-0177886	Not Applicable
28) 27.0 Country 2 App Country 3. Trust Fund Contribution in Added to F P P Country 4. Department of the purpose of charging its received agent to this provisions of Socions (07 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of charging its received agent agent or his plant of the provisions of Socions (07 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of charging its received agent agent, or both in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of charging its received agent agent, or both in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of charging its received agent agent agent, or both in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of charging its received agent a	_	vpt.#, etc.	<del>                                     </del>		5. Certificate of Status Desired	\$8.75 Additional Fee Required
9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  10. Name and Address (P.O. Box Number is Not Acceptable)  10. Name and Address (P.O. Box Number is Not Acceptable)  10. Name and Address (P.O. Box Number is Not Acceptable)  10. Name and Address (P.O. Box Number is Not Acceptable)  10. Name and Address (P.O. Box Number is Not Acceptable)  10. Name and Address (P.O. Box Number is Not Acceptable)  10. Name and Address (P.O. Box Number is Not Acceptable)  10. Name and Address (P.O. Box Number is Not Acceptable)  10. Name and Address (P.O. Box Number is Not Acceptable)  10.		State	<del></del>			\$5.00 May Be Added to Fees
S. Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   MCMILLIAN, JAN E   2000 N. DIXE HWY. #8   LAKE WORTH FL 33480   58   Street Address (P.O. Box Number is Not Acceptable)   59   Street Address (P.O. Box Number is Not Acceptable)   59   50   50   50   50   50   50   50		<b>⊢</b> ~¬ ′				
200 N. DIXIE HWY. #8 LAKE WORTH FL 33460  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 rise of chick 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, 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 floridation of the purpose of changing rise and the spread of such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered floridation of the purpose of changing rise and the separation of specific and accept the obligations of, Socion 697 3605, Florida Statutes, the above-named corporation submits this statement for the purpose of changing rise and the separation of the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment as registered rise of registered rise o		<ol><li>Name and Address of Curre</li></ol>	nt Registered Agent		10. Name and Address of New Reg	jistered Agent
TILE POST INTERPORT OF THE PROPERTY OF THE PRO	M	ICMILLIAN, JAN E		81 Name		
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 receptioned agent, or both, in the State of Florida Submits the provisions of agent, or both, in the State of Florida Submits the Port of agent and accept the obligations of Section 607 0502. Florida Statutes are completed agent, or both, in the State of Florida Submits the provisions board of directors. I hereby accept the appointment as reg agent and rate of agent of the purpose of changing its reception agent and take 4 appreciates. Florida Statutes are completely accept the appointment as reg agent and rate of appreciates. Florida Statutes are completely accept the appointment as reg agent and rate of appreciates. Florida Statutes are completely accept the appointment as reg agent and rate of appreciates. Florida Statutes are completely as regarded Apent agent and rate of appreciates. Florida Statutes are completely as a part of section for accept the appointment as reg agent and rate of appreciates. Florida Statutes are completely as a part of section for accept the appointment as reg agent and rate of appreciates. Florida Statutes are completely as a part of section for accept the appointment as reg agent and rate of appreciates. Florida Statutes are completely as a part of a part of accept the appointment as reg agent and rate of appreciates. Florida Statutes are completely as a part of accept the appointment as reg agent and rate of appreciates. Florida Statutes are completely as a part of accept the appointment as reg accept t				82 Street Add	dress (P.O. Box Number is Not Acceptab	le)
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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 and accept the obligations of, section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN MCMILLIAN, JAN E  12. OFFICERS AND DIRECTORS IN ITIE  MCMILLIAN, JAN E  2000 N. DIXIE HWY. #8  LAKE WORTH FL  14. CITY. ST-ZIP  THLE  DELETE  13. TITLE  Change  Change	11 Persus	and to the provisions of Sections 607.09	02 and 607 1508 Florida Statute	s the above-named co	rporation submits this statement for the p	· , ,
Signature, sport or prefere runne of ingolested appent and title 1 appeicable  2. OFFICERS AND DIRECTORS  1.3. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  THE MCMILLIAN, JAN E  2.000 N. DIXIE HWY. #8  LAKE WORTH FL  PHILLIPS, MARIE  2.2000 N. DIXIE HWY #8  LAKE WORTH FL  2.2 NAME  2.3 STREET ADDRESS  CITY- S1-2/P  THE  CHANGE  CHALIFOUX, GLADYS  SIRRET ADDRESS  CITY- S1-2/P  THE  CHANGE  ALKE WORTH FL  DELETE  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  CITY- S1-2/P  THE  CHANGE  CHALIFOUX, GLADYS  3.2 NAME  SIRRET ADDRESS  CITY- S1-2/P  THE  CHANGE  AS STREET ADDRESS  CITY- S1-2/P  THE  CHANGE  SIRRET ADDRESS  CITY- S1-2/P  THE  CHANGE  S1 STREET ADDRESS  CITY- S1-2/P  THE  CHANGE  S2 NAME  S2 NAME  S2 NAME  S2 NAME  S2 NAME  S3 STREET ADDRESS  CITY- S1-2/P  THE  CHANGE	office o agent	or registered agent, or both, in the Stat I am tamiliar with, and accept the oblig	e of Florida. Such change was a	uthorized by the corpora	ation's board of directors. I hereby accep	t the appointment as registered
DELETE	SIGNATUR	Signature, typical or painted name of registered as	pent and title I applicable (NOTE	Registered Agent signature requ	ulred when reinstating)	DATE
MCMILLIAN, JAN E   12 NAME   13 STREET ADDRESS   LAKE WORTH FL   14 (DIY-ST-ZIP   15 (DI	12.	OFFICERS AT	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
1.5 STREET ADDRESS	TITLE	POT	DELETE	1.1 TITLE		Change Addition
Colly-S1-2P	NAME	MCMILLIAN, JAN E		1.2 NAME		
DELETE   2.1 TITLE   Change	STREET ADDRE	ss 2000 N. DIXIE HWY. #8		1.3 STREET ADDRESS		
NAME	CHY - \$1 - ZIP	LAKE WORTH FL		14 CiTY+ST-ZiP		
28 STREET ADDRESS	11TLF	VPS	☐ DELETE	2.1 TITLE		☐ Change ☐ Additio
Colin   Col	NAME	PHILLIPS, MARIE		2.2 NAME		
DELETE   DELETE   STREET ADDRESS   STR	STREET ADORE			2.3 STREET ADDRESS		
NAME   CHALIFOUX, GLADYS   3.2 NAME   3.3 STREET ADDRESS   LAKE WORTH FL   3.4 CITY-ST-ZIP     Change   CHANGE   CITY-ST-ZIP   CITILE   CITY-ST-ZIP   CITY-ST-ZI	CITY - ST - ZIP	LAKE WORTH FL		2. 4 CITY - ST-ZIP		
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DELETE	STREET ADDRE	ss   2000 N DIXIE HWY #8		3.3 STREET ADDRESS		
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STREET ADDRESS   43 STREET ADDRESS   44 CITY-ST-ZIP	THILE		DELETE	4.1 TITLE		Change Addition
A 4 CITY-ST-ZIP	NAME			4. 2 NAME		
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5.3 STREET ADDRESS	TITLE		DELETE	5.1 TITLE		Change Addition
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NAME 62 NAME	City - St - 718			5.4 CITY-ST-ZIP		
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STREET ADDRESS 6.3 STREET ADDRESS	NAME			6.2 NAME		
	STREET ADDRE	ss		6.3 STREET ADDRESS		
CHY-SI-ZIP 64 CHY-SI-ZIP						

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 Lam 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. BENING OFFICER OF DIRECTOR DE MILLIAN 244097