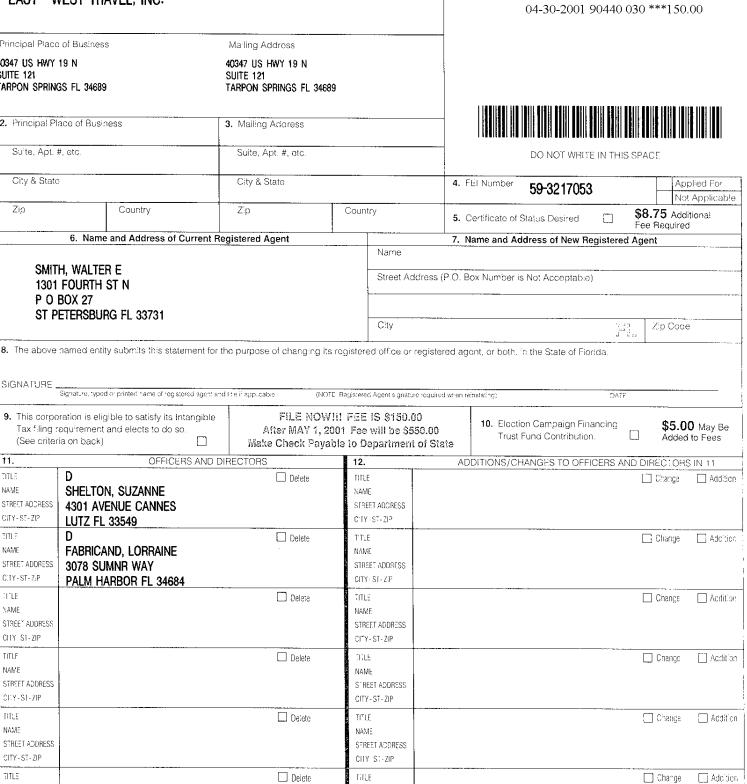
## 2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # **P9400000992** EAST - WEST TRAVEL, INC. Principal Place of Business Mailing Address 40347 US HWY 19 N 40347 US HWY 19 N **SUITE 121** SUITE 121 TARPON SPRINGS FL 34689 TARPON SPRINGS FL 34689 2. Principal Place of Business 3. Mailing Adaress Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Zip Country Country 6. Name and Address of Current Registered Agent Name SMITH, WALTER E 1301 FOURTH ST N

## FILED Apr 30, 2001 8:00 am Secretary of State



13. Thereby 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 report or supplemental 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 11 or Block 12 if changed, or on an attaching twith an address, with all other like empowered.

C.TY+S1-7P

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2001 Fee will be \$550.00

THE

NAME

TITLE

NAME

TITLE

NAME

1018

NAME

TITLE

NAM<sup>9</sup>

THE

NAME

STREET ADDRESS

STREET ADDRESS

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P O BOX 27

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11.

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TITLE

TITLE

NAME

CITY ST-ZIP

CITY-ST-ZiP

CiTY-ST-ZIP

ST PETERSBURG FL 33731

9. This corporation is eligible to satisfy its Intangible

SHELTON, SUZANNE

**4301 AVENUE CANNES** 

FABRICAND, LORRAINE

PALM HARBOR FL 34684

3078 SUMNR WAY

Tax filing requirement and elects to do so

LUTZ FL 33549

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

OFFICERS AND DIRECTORS

xann SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Suzanne Shelton

(727)938-7878