

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P21000084854

**Entity Name:** BYOB TOURS CORP

**Current Principal Place of Business:**

501 NE 31 ST  
UNIT 1806  
MIAMI, FL 33137

**FILED**  
**Jan 20, 2023**  
**Secretary of State**  
**8976586162CC**

**Current Mailing Address:**

501 NE 31 ST  
UNIT 1806  
MIAMI, FL 33137 US

**FEI Number: 87-2890017**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

TABARES KASCHEL, WILSON A  
501 NE 31 ST  
UNIT 1806  
MIAMI, FL 33137 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name TABARES KASCHEL, WILSON A  
Address 501 NE 31 ST UNIT 1806  
City-State-Zip: MIAMI FL 33137

Title VP  
Name ESTARITA, JUSTIN N  
Address 16141 SW 79TH TER  
City-State-Zip: MIAMI FL 33193

Title T  
Name VILLAREAL, HENRY A  
Address 501 NE 31 ST UNIT 1806  
City-State-Zip: MIAMI FL 33137

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE: JUSTIN ESTARITA**

**VP**

**01/20/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date