

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

PROFIT CORPORATION
ANNUAL REPORT
1996



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

FILED
Feb 08 1996 8:00 am
Secretary of State

DOCUMENT # 215436 (7)

1. Corporation Name
GREYHOUND LEISURE SERVICES, INC.



Principal Place of Business: **8052 NW 14TH STREET
P.O. BOX 592355
MIAMI FL 33126**

Mailing Address: **8052 NW 14TH STREET
P.O. BOX 592355
MIAMI FL 33126**

2. Principal Place of Business
21 []
22 []
23 []
24 []

2a. Mailing Address
26 []
27 []
28 []
29 []

25 [] Country
30 [] Country

3. Date Incorporated or Qualified: **09/13/1958**

3a. Date of Last Report: **01/18/1995**

4. FEI Number: **59-0861908**

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 has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

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

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: [] (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE: **S** [] DELETE

NAME: **EMERSON, FREDERICK G**

STREET ADDRESS: **111 W CLARENDON**

CITY-STATE-ZIP: **PHOENIX AZ**

TITLE: **PD** [] DELETE

NAME: **MIQUEL, JEAN-PIERRE**

STREET ADDRESS: **8052 N.W. 14TH STREET**

CITY-STATE-ZIP: **MIAMI FL**

TITLE: **D** [] DELETE

NAME: **TEETS, JOHN W**

STREET ADDRESS: **111 W CLARENDON AVE**

CITY-STATE-ZIP: **PHOENIX AZ**

TITLE: **VS** [] DELETE

NAME: **MERHIGE, MICHAEL**

STREET ADDRESS: **8052 N.W. 14TH STREET**

CITY-STATE-ZIP: **MIAMI FL**

TITLE: **VPT** [] DELETE

NAME: **NELSON, RONALD G.**

STREET ADDRESS: **111 W CLARENDON AVE**

CITY-STATE-ZIP: **PHOENIX AZ**

TITLE: **VP** [] DELETE

NAME: **FERNANDEZ, JORGE A**

STREET ADDRESS: **8052 NW 14TH ST**

CITY-STATE-ZIP: **MIAMI FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE [] Change [] Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE [] Change [] Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE [] Change [] Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE [] Change [] Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE [] Change [] Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE [] Change [] Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-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 119.07(3)(k), 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; that 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 on an attachment with an address.

SIGNATURE: *[Signature]* DATE: **1/29/96** (305) 594-9378

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)