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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90045 044 ***150.00

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 275254 1. Corporation Name

STREET ADDRESS

CITY-ST-ZIP

BEVERLY TRAVEL SERVICE INC

* * \$	The market of						11)
Principal Place	e of Business	Mailing Address			I IBBIIS (IBII (BBB) BUIS 11600 Brits pie	r Biêji Biāit Brāis asam a	1811 81811 1991
633 S. 60TH AVE.		633 S. 60TH AVE.			ļ		
W. HOLLYWOOD FL 33023		W. HOLLYWOOD FL 33023		DO NOT WRITE IN	I THIS SPACE		
					3. Date Incorporated or Qualifed	THIS STACE	
	,				10/31/1963		}
2 Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	Apr	olied For
21	ace of Dasiness	26			59-1025226	Not	Applicable
	#, etc.	Suite, Apt. #, etc.	7			\$8.75 A	
22	,	27			5. Certificate of Status Desired	Fee Re	quired
City & State	e .	City & State			6. Election Campaign Financing	\$5.00	
23		28			Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Country		8. This corporation owes the current y		□No
24	25	29 30)		Personal Property Tax. 10. Name and Address of New Regis		LINO
	9. Name and Address of Current	Registered Agent	81	Name	1.	stered Agent	-
MAR	TINA L. HALL		"	Name	Martina L. Ha	<u> </u>	
	' SW 5TH ST		82	Street A	ddress (P.O. Box Number is Not Acceptable)	Shank	l
PEMBROKE PINES FL 33023			83		12001 NW 26th	Street	
	•		63			.,	
PLATT'S LEGITLY SECTION SEC			84	City	Plantation	FL 85 Zip C	223
44 Durayant	. /		1 1				
II. Fuisuaiii	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above	-named co	orporation submits this statement for the purp	ose of changing its	registered
office or n agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the Shate o m familiar with, and accept the obligati	and 607.1508, Florida Statutes, f Florida. Such change was auth ons of, Section 607.0505, Florida	the above orized by t a Statutes.	e-named co the corpora	orporation submits this statement for the purp ation's board of directors. I hereby accept the	ose of changing its appointment as reg	registered gistered
SIGNATURE	Macting 1/1	720			orporation submits this statement for the purp ation's board of directors. I hereby accept the	ose of changing its appointment as reg	registered gistered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	egistered Agent		uired when reinstating)	120 199 ATE	
SIGNATURE	Signature, typed or printed name or registered agent OFFICERS AND	and title if applicable. (NOTE: Re	ngistered Agent		\mathcal{L}_{i}	120 199 ATE	
SIGNATURE 12. TITLE	Signature, speed or printed name of registered agent OFFICERS AND	and title if applicable. (NOTE: Re	13.		uired when reinstating)	ATE RS AND DIRECTO	RS IN 12
SIGNATURE 12. TITLE NAME	Signature, special or printed name of registered agent OFFICERS AND P HALL, BEVERLY	and title if applicable. (NOTE: Re	13. 1.1 TITLE 1.2 NAME	t signature req	uired when reinstating)	ATE RS AND DIRECTO	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, speed or printed name of registered agent OFFICERS AND P HALL, BEVERLY 10830 HICKORY AVE	and title if applicable. (NOTE: Re	13. 1.1 TITLE 1.2 NAME 1.3 STREET	t signature req	uired when reinstating)	ATE RS AND DIRECTO	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, speed or printed name of registered agent OFFICERS AND P HALL, BEVERLY 10830 HICKORY AVE PEMBROKE PINES, FL 00000	and title if applicable. (NOTE: Re	13. 1.1 TITLE 1.2 NAME	t signature req	uired when reinstating)	ATE RS AND DIRECTO	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent OFFICERS AND P HALL, BEVERLY 10830 HICKORY AVE PEMBROKE PINES, FL 00000 VPST	and title if applicable. (NOTE: Re	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST	t signature req	uired when reinstating)	RS AND DIRECTO	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, sped or printed name of registered agent OFFICERS AND P HALL, BEVERLY 10830 HICKORY AVE PEMBROKE PINES, FL 00000 VPST HALL, MARTINA L	and title if applicable. (NOTE: Re	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE	ADDRESS	uired when reinstating) ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P HALL, BEVERLY 10830 HICKORY AVE PEMBROKE PINES, FL 00000 VPST HALL, MARTINA L 6407 SW 5TH ST	and title if applicable. (NOTE: Re	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME 2.3 STREET	ADDRESS -ZIP ADDRESS	ulred when reinstating) ADDITIONS/CHANGES TO OFFICE 12061 NW 26" S+	ATE RS AND DIRECTO Change	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, sped or printed name of registered agent OFFICERS AND P HALL, BEVERLY 10830 HICKORY AVE PEMBROKE PINES, FL 00000 VPST HALL, MARTINA L	and title if applicable. (NOTE: Re	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME	ADDRESS -ZIP ADDRESS	uired when reinstating) ADDITIONS/CHANGES TO OFFICE 12001 NW 26* St	ATE RS AND DIRECTO Change	RS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITÝ-ST-ZIP TITLE	P HALL, BEVERLY 10830 HICKORY AVE PEMBROKE PINES, FL 00000 VPST HALL, MARTINA L 6407 SW 5TH ST	and title if applicable. (NOTE: Re D DIRECTORS DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-ST	ADDRESS -ZIP ADDRESS	ulred when reinstating) ADDITIONS/CHANGES TO OFFICE 12061 NW 26" S+	RS AND DIRECTO Change	RS IN 12 Addition
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6.3 STREET ADORESS

6.4 CITY-ST-ZIP

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 of 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.