FILED Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90039 023 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 414633

1. Corporation TRANSO	LAR TRAVEL, INC					11211 1121 1121 1121 1201 1121 1121 1121	
Principal Place of Business Mailing Address					t sootil diaan siesi afara aliaa ilian ten asari	#1811 #1911 #1#11 #1#11	
C/O WALTER T. ROSE, JR. 101 N. ATLANTIC AVENUE  C/O WALTER T. RO 101 N. ATLANTIC AVENUE			VENUE		DO NOT WRITE IN THIS SPACE		
COCOA BEACH FL 32931 GOCOA BEACH F			2931		3. Date Incorporated or Qualifed		
		Addition Addition			12/13/1972 4. FEI Number	Appli	ed For
2. Principal Place of Business		2a. Mailing Address		NOT APPLICABLE	— <del>                                    </del>	pplicable	
21   Suite, Apt. #, etc.		Suite, Apt. #, etc.		_	\$8.75 Add		
22		27		5. Certifcate of Status Desired	Fee Requ		
City & State		City & State		6. Election Campaign Financing	\$5.00 Ma	av Be	
23		28		Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Countr	y	8. This corporation owes the current year Ir		_
24	25	29 30	9		Personal Property Tax.		No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered	Agent	
****			81	I Name			
MCGEE, DAVID			82	Street Ad	Idress (P.O. Box Number is Not Acceptable)		
258 BIMINI RD.				<u> </u>			-
COCOA ISLES			83	3			
COCOA BEACH FL 32931		,	84	1 City		85 Zip Coo	de
		_	- 1	'	FI	L	
office or re agent. I ar SIGNATURE	to the provisions of Sections 607.050.  ggistered agent, or both, in the State on familiar with, and accept the obligations of the state of the section of t	of Florida. Such change was autr tions of, Section 607.0505, Florida	onzed by a Statute	y the corpora s.	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appointment of the purpose of the purpos	intment as regis	tered
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS	3 IN 12
TITLE	Р	☐ DELETE 1.				☐ Change	Addition
NAME	MCGEE, DAVID		1.2 NAME				
STREET ADDRESS	30 SEA ROAD WALLASEY		1.3 STREET ADDRESS				
CITY-ST-ZIP	MERSEYSIDE, ENGLAND		1.4 CITY-	ST-ZIP			
TITLE	ST	☐ DELETE	2.1 TITLE			☐ Change	Addition
NAME	MCGEE, BARBARA		2.2 NAME				
STREET ADDRESS	505 SNUG HARBOR DRIVE		2.3 STREE	ET ADDRESS			
CITY-ST-ZIP	MERRITT ISLAND FL		2. 4 CITY-	ST-ZIP			
TITLE	V	☐ DELETE_	3.1 TITLE			Change -=	: [=] Addition
NAME .	MCMAHON, PATRICIA		3.2 NAME				
STREET ADDRESS	8 LINKS VIEW WALLASEY		3.3 STREET ADDRESS				
CITY-ST-ZIP	MERSEYSIDE, ENGLAND		3.4. CITY-	ST-ZIP		*	
TITLE		☐ DELETE	4.1 TITLE			Change	Addition`
NAME			4. 2 NAME		·		
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP	<u> </u>		4.4 CITY-			F-7.01	T Addison
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS	RESS			ET ADDRESS			
CITY-ST-ZIP				ST-ZIP		Change	Addition
TITLE	DELETE		6.1 TITLE 6.2 NAME			☐ Change	C) radinoti
NAME							
STREET ADDRESS			6.3 STRE	ET ADDRESS			

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 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: