

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 495261

1. Entity Name

AIB TRAVEL AND TOURS, INC.

**FILED**  
May 01, 2000 8:00 am  
Secretary of State

05-01-2000 90425 013 \*\*\*158.75

Principal Place of Business

Mailing Address

8101 SW 24 St.

2500 NW 79 AVE  
MIAMI FL 33122  
US

8101 SW 24 St.  
Suite B  
MIAMI, FL 33155  
US

2500 NW 79 AVE  
MIAMI FL 33122-1071  
US

Suite B  
MIAMI, FL 33155  
US

2. Principal Place of Business

8101 SW 24 St.

3. Mailing Address

8101 SW 24 St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

B

B

City & State

MIAMI FL

City & State

MIAMI FL

Zip

Country

33155

US

Zip

Country

33155

US

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CONE, PERRY I  
2500 NW 79TH AVE.  
MIAMI FL 33122

Name

KARINA F CLEMENTS

Street Address (P.O. Box Number is Not Acceptable)

8101 SW 24 St Suite B

City

MIAMI

FL

Zip Code

33155

8. 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

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

KARINA F. Clements

(NOTE: Registered Agent signature required when reinstating)

4/27/00

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Delete
DCP	ALVAREZ, JOSE M	2500 NW 79TH AVE.	MIAMI FL 33122	<input checked="" type="checkbox"/>
TD	TORGAS, ED S	2500 NW 79 AVE	MIAMI FL	<input checked="" type="checkbox"/>
DAS	SOTO, JOHN M	2500 NW 79 AVE	MIAMI FL	<input checked="" type="checkbox"/>
S	CONE, PERRY I.	2500 NW 79 AVE	MIAMI FL 33122	<input checked="" type="checkbox"/>
DV	FERNANDEZ, SERGIO	2500 N.W. 79TH AVE	MIAMI FL 33122	<input checked="" type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change	Addition
DPTS	MERCEDES PALMERO	8101 SW 24 St. Suite B	MIAMI, FL 33155	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. 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 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 attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MERCEDES PALMERO 4/27/00 (305) 265-0057

Date

Daytime Phone #

CR2E034 (9/99)