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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 498896

(0)

Mailing Address

FOUR SEASONS TRAVEL, INC.

FILED Apr 16 1998 8:00am Secretary of State



3528 NORTH FEDERAL HIGHWAY FT LAUDERDALE FL 33308		3528 NORTH FEDERAL HIGHWAY FT LAUDERDALE FL 33308		DO NOT WRIT	E IN THIS S	PACE			
					3. Date Incorporated or Qualified 03/15/1976				
2. Principal F	2a. Mailing Address	Address		4. FEI Number			Applied For		
21		26			59-1654653			Not Applicable	
Suite, Apt.	·	Suite, Apt. #, etc.	27				\$8.75 Additional Fee Required		
City & Stat		City & State			6. Election Campaign Financing Trust Fund Contribution			O May Be of to Fees	
Zip 24	25 29 30			untry 8. This corporation owes or has paid the current year Intangib Personal Property Tax due June 30. Yes □ No				_ ~	
	9. Name and Address of Curr	rent Registered Agent		10. Name and Address of New Registered Agent					
	JCHNER, ROBERT J.			81 Name					
977 N.W. 83 DR. CORAL SPRINGS FL 33071				82 Street Add	Street Address (P.O. Box Number is Not Acceptable)				
			L	83					
44.5				64 City		FL	"	p Code	
11. Pursuant office or l agent. La	to the provisions of Sections 607.0 registered agent, or both, in the Starm familiar with, and accept the ob-	i502 and 607.1508, Florida Statu ate of Florida. Such change was ligations of, Section 607.0505, Fl	tes, the ab authorized orida Statu	ove-named cor by the corpora ites.	rporation submits this statement for the ation's board of directors. I hereby acceptation	purpose of o opt the appo	changing intment	j its registered as registered	
SIGNATURE									
	Signature, typed or printed name of registered			Agent signature requ	uired when reinsteling)	DATE			
12.	OFFICERS A	AND DIRECTORS	13.	<u> </u>	ADDITIONS/CHANGES TO OFF				
TITLE	BUCHNER, SARA	☐ DELETE	1.1 T)T)			L	Chang	e 🔲 Addition	
NAME	977 N.W. 83 DR.		1.2 NA	··-	-				
STREET ADDRESS	CORAL SPRINGS FL			EET ADDRESS					
CITY+SI-ZIP	CONAL SPRINGS PL	C occess		Y-ST-ZIP			٦		
TITLE	BHOTHER BOBLOL I	☐ DELETE	2.1 TIT	- 1		L	Chang	e 🔲 Addition	
NAME	BUCHNER, ROBERT J. 977 N.W. 83 DR.		2.2 NA						
STREET ADDRESS	CORAL SPRINGS FL			EET AODRESS					
CITY-ST-ZIP	B CONAL OFFIITOS FL	DELETE		Y-ST-ZIP		,	10		
TITLE	LARKIN, LYNN S	C DECEIF	3.1 TITI	·		L	Change	e Addition	
NAME	1408 N.E. 9TH ST.		3.2 NA	···					
STREET ADDRESS	FT LAUDERDALE FL			EET ADDRESS					
CITY - ST - ZIP TITLE	S	☐ DELETE	3.4. CH 4.1 TITI	Y-ST-ZIP			Change	e Addition	
NAME	LARKIN, THOMAS A		4. 2 NA	į			Unionly	5	
STREET ADDRESS	1408 N.E. 9TH ST.			EET ADDRESS					
CITY-ST-ZIP	FT LAUDERDALE FL			Y-ST-ZIP					
TITLE		☐ DELETE	5.1 T(T)				Change	e 🔲 Addition	
NAME]		5.2 NA			•			
STREET ADDRESS				EET ADDRESS					
CITY-ST-ZIP				Y-ST-ZIP					
THE		☐ DELETE	6.1 TITL		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	Change	Addition	
NAME		- •	6.2 NAM						
STREET ADDRESS				EET ADORESS					
CITY-ST-ZIP				r-ST-ZIP					
	A		9.1011						

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.

SIGNATURE: / ////

13/4/190

1864 1900