## 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 # 503342

BEACH TRAVEL AGENCY OF FORT MYERS, INC.

Principal Place of Business	Mailing Address
Tiricipal Place of Business	Walling Address
2710-4 MCGREGOR BLVD.	12710-4 MCGREGOR BLVD.
MYERS FL 33919	FT MYERS FL 33919

## FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90039 044 \*\*\*150.00



12710-4 MCGRE FT MYERS FL 3		12710-4 MCGREGOR BLVD. FT MYERS FL 33919			DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed 05/17/1976			
Principal Place of Business     2a. Mailing Address					4. FEI Number	$\top$	Applied For	
26					59-1662852		Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		<del></del>		\$8.75	Additional	
22		27			5. Certificate of Status Desired	Fee	Required	
City & State	•	City & State			6. Election Campaign Financing	\$5.0	<b>0</b> May Be	
23		28			Trust Fund Contribution		d to Fees	
Zip	Country	Zip	Coun	try	8. This corporation owes the current year Inta	angible	<del>-</del>	
			30		Personal Property Tax. Yes No			
	9. Name and Address of Current	<del></del>			10. Name and Address of New Registered	Agent		
			1	Name				
BUONGIORNO, JEFF 12710-4 MCGREGOR BLVD.			-	Street Add	Address (P.O. Box Number is Not Acceptable)			
FT. N	MYERS FL 33919		i la	33				
			ļ_			-C-T-=		
-			}*	94 City	FI.	85   Zi	p Code	
	Signature, typed or printed name of registered agent		<del></del>	gent signature requir	red when reinstating)  DATE  ADDITIONS (CHANGES TO OFFICERS AN	D DIREC	TORS IN 12	
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	Р .	C) DELETE	1.1 πίζ			Chang	ge 🗀 Addition	
NAME	BUONGIORNO, JANICE		1.2 NAM	IE	· •			
STREET ADDRESS	12710-4 MCGREGOR BLVD.		1.3 STR	EET ADDRESS	,			
CITY-ST-ZIP	FT MYERS, FL 00000	<u> </u>	1.4 CIT	/-ST-ZIP		<del></del>		
TITLE (	V .	☐ DELETE	2.1 TITL	E		Chang	ge 🔲 Addition	
NAME	BUONGIORNO, JEFFREY		2.2 NAM	Œ				
STREET ADDRESS	12710-4 MCGREGOR BLVD.		2.3 STR	EET ADDRESS				
CITY-ST-ZIP	FT MYERS, FL 00000		2.4 CIT	Y-ST-ZIP		<del></del>		
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NAME			6.2 NAM	1E [				
STREET ADORESS			6.3 STR	EET ADDRESS				
OFF TO VOIC			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 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.
SIGNATURE:
Application 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.
SIGNATURE:

SIGNATURE:

941-481-5610