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

CITY-ST-ZIP

FILED PROFIT May 13 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # VRB TRAVEL, INCORPORATED Principal Place of Business Mailing Address 100-OCEAN RD ~100 OCEAN RD-SUITE-112 VERO BEACH FL 32963 SUITE-112 VERO BEACH FL 32963 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>08/15/1977</u> 2. Principal Place of Business 2a. Mailing Address Applied For 220 Live Oak Wai 220 Live Oak Way 26 59-1795180 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zφ Country  $Z_{1D}$ Country 8. This corporation owes or has paid the current year Intangible 24 25 Yes 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HOUPT, JOANN U. 100 GOEAN RD 220 Live Cak way 82 Street Address (P.O. Box Number is Not Acceptable) VERO BCH FL 32963 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or pointed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DST TITLE DELETE Change 1.1 TITLE ☐ Addition NAME HOUPT, JOANN U 1.2 NAME 220 Live Oak way 400 OCEAN RD #112 STREET ADDRESS 1.3 STREET ADDRESS VERO BCH FL 32963 CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE TITLE 2.1 TITLE Change \_\_\_ Addition HOUPT, DONALD NAME 2.2 NAME 220 Live Oak Way 400-0GEAN RD #112 STREET ADDRESS 2.3 STREET ADDRESS **VERO BCH FL** 32963 CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE Change 3.1 THEF ■ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 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 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY - ST - 7IP TITLE DELETE Change ☐ Addition 61 TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 trusted 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 a address.