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FILED
Sep 01 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham,
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 620507
1. Corporation Name

GRAN TRAVEL AGENCY, INC.

Principal Place of Business
2351 WEST FLAGLER ST
MIAMI FL 33135

Mailing Address
2351 WEST FLAGLER ST
MIAMI FL 33135

3. Date Incorporated or Qualified 05-04-1979	3a. Date of Last Report 04-01-1998
4. FEI Number 59-1907528	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Country
24	29
25	30

9. Name and Address of Current Registered Agent

VIDAL, SERGIO
2351 WEST FLAGLER ST.
MIAMI FL 33135

10. Name and Address of New Registered Agent

81 Name VIDAL, SERGIO CARLOS
82 Street Address (If Not Same as Current Agent's) 2351 WEST FLAGLER ST
83
84 City MIAMI
85 Zip Code FL 33135

11. Pursuant to the provisions of Sections 607.0502 and 607.1509, 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 of present or previous registered agent and, if applicable, (NOTE: Registered Agent Signature required when reinstating)

8-17-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	VIDAL, SERGIO	11 TITLE PD	VIDAL, SERGIO CARLOS
NAME		12 NAME	
STREET ADDRESS	2351 WEST FLAGLER ST	13 STREET ADDRESS	2351 W. FLAGLER ST
CITY-ST-ZIP	MIAMI FL	14 CITY-ST-ZIP	MIAMI FL
TITLE TS	O'DELL, ANA(asst. sec)	21 TITLE TS	O'DELL, ANA
NAME		22 NAME	
STREET ADDRESS	6755 NW 169 St. # C	23 STREET ADDRESS	2351 W. FLAGLER ST
CITY-ST-ZIP	HIALEAH FL 00000	24 CITY-ST-ZIP	MIAMI FL 33135
TITLE S.	VIDAL, TERESA	31 TITLE	
NAME		32 NAME	
STREET ADDRESS	19220 ROYAL BIRKDALE	33 STREET ADDRESS	
CITY-ST-ZIP	HIALEAH FL	34 CITY-ST-ZIP	
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	400002631914
CITY-ST-ZIP		54 CITY-ST-ZIP	-09/04/98--01014--038
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-17-98 (305) 649-5700

CR2E034 (9/96)