FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 FEB 27 AM 12:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **649824** **(0)**

1. Corporation Name

SEABREEZE TRAVEL OF FORT LAUDERDALE, INC.

Principal Place of Business	Mailing Address
2200 ELLER DRIVE P. O. BOX 13036 FORT LAUDERDALE FL 33316	2200 ELLER DRIVE P. O. BOX 13036 FORT LAUDERDALE FL 33316

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **12/11/1979**
3a. Date of Last Report: **04/04/1994**

2. Principal Place of Business — 21:
2a. Mailing Address — 26:

Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27:

City & State — 23:
City & State — 28:

Zip — 24:
Country — 25:
Zip — 29:
Country — 30:

4. FEI Number: **59-1964737** ☐ 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

9. Name and Address of Current Registered Agent

DOUGLAS, GENE
2200 ELLER DRIVE
FT. LAUDERDALE FL 33316

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE		☒ Change ☐ Addition
NAME	STANNARD, DAVID	12 NAME		
STREET ADDRESS	1402 S.E. 17TH STREET	13 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE, FL 00000	14 CITY-ST-ZIP	FT LAUDERDALE, FL 33316	
TITLE	DC	21 TITLE		☒ Change ☐ Addition
NAME	HVIDE, HANS J.	22 NAME		
STREET ADDRESS	2200 ELLER DRIVE	23 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL	24 CITY-ST-ZIP	FT LAUDERDALE, FL 33316	
TITLE	VTD	31 TITLE		☒ Change ☐ Addition
NAME	FARMER, GERALD	32 NAME		
STREET ADDRESS	2200 ELLER DRIVE	33 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL	34 CITY-ST-ZIP	FT LAUDERDALE, FL 33316	
TITLE	VS	41 TITLE		☒ Change ☐ Addition
NAME	DOUGLAS, GENE	42 NAME		
STREET ADDRESS	2200 ELLER DRIVE	43 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL	44 CITY-ST-ZIP	FT LAUDERDALE, FL 33316	
TITLE	PD	51 TITLE		☒ Change ☐ Addition
NAME	BENEDICT, CAROL L.	52 NAME		
STREET ADDRESS	1402 SE 17TH STREET	53 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL	54 CITY-ST-ZIP	FT LAUDERDALE, FL 33316	
TITLE		61 TITLE	VP/D	☐ Change ☒ Addition
NAME		62 NAME	HVIDE, J ERIK	
STREET ADDRESS		63 STREET ADDRESS	2200 ELLER DRIVE	
CITY-ST-ZIP		64 CITY-ST-ZIP	FT LAUDERDALE FL 33316	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Gene Douglas VP/D Secy 2/15/95 (305) 524-4200, Ext. 800
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL FILING ON DIRECTOR — DATE — TELEPHONE

Gene Douglas VP/D Secy

0824308 CP