## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## FILED May 02, 2002 8:00 am Secretary of State

DOOLNELT !! ( ) S			05-02-2002 90119 016 ***150.00	
DOCUMENT # 6652/3  1. Entity Name			03-02-200	2 20112 010 130.00
Destinations Everywhere, Inc.				
			·	•
DO NOT WRITE IN THIS SPACE				•
2. Principal Place of Business 32 First Street South				
Suite, Apt. #, etc.	Suite, Apt. #, etc.	TOO TOO TK	DO NOT WRITE	E IN THIS SPACE
City & State	city & State		4. FEI Number Applied For	
St. Petersburg FL	St. Petersbu	rg, FL	59-1983160	Not Applicable
- 33701 - USA	33701	USA	5. Certificate of Status Desired	\$8.75 Additional Fee Required
		Name	7. Name and Address of Current F	Registered Agent
DO NOT WR	ITE	/0/	ton William J.	<i>III</i> _
IN THIS SPA		32 Fi	P.O. Box Number is Not Acceptable) PSF STREET South	
IIIIO 01 F	IOL			
		city5t. Pe	tersburg	FL Zip Code
8. The above named entity submits this statement for the	e purpose of changing its r	egistered office or register	ed agent, or both, in the State of Flori	ida.
SIGNATURE William J.	Tolton,	111		4/22/02
		Registered Agent signature required by 1 Fine is \$150,00	when reinslating)	ATE
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)	After May 1 Amended	y - Fee is \$150,00 , Fee is \$650,00 UBR is \$61.25 s to Department of Stat	10. Election Campaign Fina Trust Fund Contribution.	~ <b>40.00</b> May be
11. OFFICERS AND DIR		a to Department of Stat	n	
NAME William J. Tolton, I	W.	TITLE NAME		703)
STREET ADDRESS 32 First Street South	L	STREET ADDRESS		8 (12
TITLE VITD	5701	CATA SE-FILE		CR2E034B (12/01)
NAME Jory D. Williams	<i>c</i>	title Nami		CR21
THE ST-2P ST. Petersburg FL 3370/				
NAME STREET ADDRESS		MAZE Seret adoreso		
CITY-ST-ZIP	***************************************	C014-S1-218	DO NOT V	VRITE
TITLE NAME		itilis Nami	IN THIS S	PACE
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS		
TILE		Off-St. 716 The		
NAME		KARE		
STREET ADDRESS CITY- ST-ZIP		STRUET ADDRESS CITY ST. DR		
птц.	·····	nng		
NAME STREET ADDRESS		NAME STREET ABBRESS		
CITY-ST-ZIP	·	CITY SILEP		
13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.				
SIGNATURE: Win Sun Jolton III Wm. Jeve Tolton III 4/23/02 (727)823-0097				