

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

**FILED**

**Feb 04 1997 8:00am  
Secretary of State**

**PROFIT CORPORATION  
ANNUAL REPORT  
1997**



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

**DOCUMENT # 666469 (2)**

1. Corporation Name  
**BRICKELL EXECUTIVE TRAVEL, INC.**



Principal Place of Business  
**600 BRICKELL AVE.  
SUITE 104/603  
MIAMI FL 33131  
US**

Mailing Address  
**600 BRICKELL AVE.  
SUITE 104/603  
MIAMI FL 33131-2539  
US**

3. Date Incorporated or Qualified  
**04/10/1980**

3a. Date of Last Report  
**04/05/1996**

2. Principal Place of Business  
21 **600 Brickell Ave.**

2a. Mailing Address  
26 **14124 S.W. 77 ST.**

4. FEI Number  
**59-1989069**

Applied For  
 Applied For  
 Not Applicable

22 **STE 104**

27 Suite, Apt. #, etc.

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

23 **MIA. FL.**

28 **MIA. FL.**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

24 **33131** 25 **USA**

29 **33183** 30 **USA**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
**FRASCARELLI, MARTA C.  
600 BRICKELL AVE.  
SUITE 104/603  
MIAMI FL 33131**

10. Name and Address of New Registered Agent

81 Name **FRASCARELLI, MARTA C.**

82 Street Address (P.O. Box Number is Not Acceptable)  
**600 BRICKELL AVE #57E 104**

83 -

84 City **MIA.** 85 Zip Code **FL 33131**

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]* (NOTE: Registered Agent's signature required when reinstating) DATE **JAN 14/97**

12. OFFICERS AND DIRECTORS

TITLE	<b>T</b>	<input type="checkbox"/> DELETE
NAME	<b>DEFELICE, HORACIO</b>	
STREET ADDRESS	<b>600 BRICKELL AVE.</b>	
CITY - ST - ZIP	<b>MIAMI FL 33131</b>	
TITLE	<b>S</b>	<input type="checkbox"/> DELETE
NAME	<b>FRASCARELLI, LUIS E</b>	
STREET ADDRESS	<b>600 BRICKELL AVE.</b>	
CITY - ST - ZIP	<b>MIAMI FL 33131</b>	
TITLE	<b>P</b>	<input type="checkbox"/> DELETE
NAME	<b>FRASCARELLI, MARTA C.</b>	
STREET ADDRESS	<b>600 BRICKELL AVE.</b>	
CITY - ST - ZIP	<b>MIAMI FL 33131</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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, changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: **JAN 14/97** (305) 385-8400

0173881

CR2E034 (9/96)