FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **842541** **(5)**

1. Corporation Name
FABREGA TRAVEL, INC.

Principal Place of Business
900 SIXTH AVE. SOUTH
NAPLES FL 33940

Mailing Address
900 SIXTH AVE. SOUTH
NAPLES FL 33940

3. Date Incorporated or Qualified: **02/05/1979**

3a. Date of Last Report: **01/31/1995**

4. FEI Number: **43-1984943** ☐ 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
21/26		
22/27	Suite, Apt. #, etc.	Suite, Apt. #, etc.
23/28	City & State	City & State
24/29	Zip	Zip
25/30	Country	Country

9. Name and Address of Current Registered Agent

FABREGA, STEWART
900 SIXTH AVE. SOUTH
NAPLES FL 33940

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 607.1545, 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 _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	**TS** **FABREGA, STEWART** **4901 GULFSHORE BLVD. NO. #303** **NAPLES FL 33940** ☐ DELETE	1-3 TITLE / 1-2 NAME / 1-3 STREET ADDRESS / 1-4 CITY-ST-ZIP	☒ Change ☐ Addition 3035 Lancaster Square Blvd #3 Naples, Fl 33942
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	**PDV** **FABREGA, STEWART** **4901 GULFSHORE BLVD. NO. #303** **NAPLES FL 33940** ☐ DELETE	2-1 TITLE / 2-2 NAME / 2-3 STREET ADDRESS / 2-4 CITY-ST-ZIP	☒ Change ☐ Addition 3035 Lancaster Square Blvd #3 Naples, Fl 33942
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	3-1 TITLE / 3-2 NAME / 3-3 STREET ADDRESS / 3-4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	4-1 TITLE / 4-2 NAME / 4-3 STREET ADDRESS / 4-4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	5-1 TITLE / 5-2 NAME / 5-3 STREET ADDRESS / 5-4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	6-1 TITLE / 6-2 NAME / 6-3 STREET ADDRESS / 6-4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (12/95)

14. I do hereby 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 12 or Block 13 with an indication that I am an officer or director.

SIGNATURE: Stewart Fabrega — March 27, 1996 — 941-263-3232

Stewart Fabrega
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date — Daytime Phone #