

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Jun 05 1997 8:00am
Secretary of State

DOCUMENT # 854754

(9)

1. Corporation Name
RAVEL INC.



Principal Place of Business

P.O. BOX 10000
PINELLAS PARK FL 34684

Mailing Address

P.O. BOX 10000
PINELLAS PARK FL 33780-6400

3. Date Incorporated or Qualified
11/23/1982

3a. Date of Last Report
04/23/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number
13-3112995

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

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PTD ☐ DELETE
NAME KOICHI, TANAKA
STREET ADDRESS 11525 53RD ST. NORTH
CITY-ST-ZIP CLEARWATER FL

11 TITLE ☐ Change ☒ Addition
12 NAME D
13 STREET ADDRESS Tamamura, Akira
14 CITY-ST-ZIP San Francisco, CA

TITLE ☐ DELETE
NAME FRAZIER, STEVEN
STREET ADDRESS 11525 53RD ST. NORTH
CITY-ST-ZIP CLEARWATER FL

EVP
OSAMU SHIKAI
11525 53rd Street N
CLEARWATER, FL

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

TITLE ☐ DELETE
NAME ABE, TADAO
STREET ADDRESS 850 THIRD AVENUE
CITY-ST-ZIP NEW YORK NY

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

TITLE ☐ DELETE
NAME KUWAYAMA, YUKIHIRO
STREET ADDRESS 2-23-21 HIGASHIUEO
CITY-ST-ZIP TAITO-KU, TOKYO JAPAN

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE ☐ DELETE
NAME TAKAHIRO, KUWAYAMA
STREET ADDRESS 2-23-21 HIGASHIUEO
CITY-ST-ZIP TOKYO JA

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE ☐ DELETE
NAME FRAZIER, STEVEN
STREET ADDRESS 11525 53RD ST. NORTH
CITY-ST-ZIP CLEARWATER FL

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
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.

CR2E034 (9/96)

6-5-97
Bank Exp 165.00