COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. MOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Sep 15, 1999 8:00 am Secretary of State

09-15-1999 90005 019 ***550.00

OCUMENT # F07966

CONTEMPORARY TRAVELER, INC.

|--|--|

ncipal Plac	e of Business	Mailing Address					
S. OCEAN DR. YWOOD FL 33019			3808 S. OCEAN DR. HOLLYWOOD FL 33019			,	
		HOLLYWOOD FL 3				DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	\neg
						12/05/1980	
Principal Place of Business 2a. Mailing Address			ee			4. FEI Number Applied For	
						59-2049215 Not Applicab	—
Suite, Apt. #, etc. Suite, Apt. #, etc. 27 City & State City & State 28					\$8.75 Additional		
		— — · · · ·	1			5. Certificate of Status Desired Fee Required	
			City & State				
		 -1 -				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	ļ
		Zip					
Zip	— ·		30	, (i) i(i) y		8. This corporation owes the current year Intangible Personal Property. Yes No	
	9. Name and Address of Cur	29 Agent	[30]			10. Name and Address of New Registered Agent	-
	9. Name and Address of Cur	rent Registered Agent		81	Name	IV. Hallie alla Addiese et New Neglettied Figure	_
THE	PRENTICE-HALL CORPORATI	ON SYSTEM, INC.					
	HAYS STREET	OH OTOTEM, WO.		82	Street Ad	dress (P.O. Box Number is Not Acceptable)	Ì
STE				83	ļ		
	AHASSEE FL 32301			83	ļ		
IALL	ATIAGOLL I L 02001			84	City	FL 85 Zip Code	\neg
						· · · · · · · · · · · · · · · · · · ·	_
office or	registered agent, or both, in the Stam familiar with, and accept the olders.	ate of Florida, Such chanc	ia was authoriz	ea by	the corpora	poration submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered	
NATURE		<u> </u>					İ
	Signature, typed or printed name of registered				Agent signature r	required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
		AND DIRECTORS	13				
	DP	L DEL		TITLE		Change Addition	n ;
:	SINGER, HAROLD			1.2 NAME			
ET ADDRESS	1751 NW 107TH DR.		1.3	1.3 STREET ADDRESS			
ST-ZIP	CORAL SPRINGS FL			CITY-S	T-ZIP		_ ;
	DV	DEL	ETE 2.1	TITLE		Change Addition	ın 📗
	LIPSY, DONALD		2.2	NAME			_ _
ET ADDRESS	10665 NW 17TH CT.		2.3	STREET	ADDRESS		
ST-ZIP	CORAL SPGS. FL		2.4	CITY-ST	T-ZIP		_
		DEI	.ETE 3.1	TITLE		Change Addition	'n
1			3.2	NAME			
ET ADDRESS			3.3	STREET	ADDRESS		
3T-ZiP			3.4	CITY-S1	r-zip]
			TITLE		Change Addition	'n	
:				NAME			J
ET ADDRESS			4.3 :	STREET	ADDRESS		
				CITY-S1			- (
ST-ZIP		DEL		5.1 TITLE		Change Addition	,n
				NAME		Orlange Advan	"
T ADDOCOC					ADDRESS		
ET ADDRESS			1		ì		
3T-ZIP	l			CITY-ST Title	1-ZiP		\dashv
		L DEL	.C.I.C			Change Addilio	п
				NAME			
:T ADDRESS			6.3	STREET	ADDRESS		

6.4 CITY-ST-ZIP 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 ndicated 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 n Block 12 or Block 13 if changed, or on an attachment with an address.

GNATURE: