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(Cit	ty/State/Zip/Phone	: #)
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(1)

T GLASS



March 20, 2020

FRANK GUTTA 490 SAWGRASS CORP PKWY SUITE 310 SUNRISE, FL 33325 US

SUBJECT: DE AFRIQUE TOURS AND TRAVEL (PTY) LTD

Ref. Number: W20000029711

We have received your document for DE AFRIQUE TOURS AND TRAVEL (PTY) LTD and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The use of LIMITED or LTD. is not sufficient as a corporate designation. The name must include a word such as INCORPORATED, INC., CORPORATION or CORP.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tacarri K Glass Regulatory Specialist II

Letter Number: 320A00006146

RECEIVED

MAR 3 1 2020

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJI	FCT: De Afrique Tours & Travel (P	ty) Ltd		
501501		f corporation	- must include suffix	
Dear Si	ir or Madam:			
"Certif		of Good Stan	Authorization to Transact Business in ding" and check are submitted to regises in Florida.	
Please	return all correspondence concernin	ig this matter	to the following:	
Frank (dutta			
<u> </u>		Name of	Person	
Gutta, S	Sharfi, & Co.			
		Firm/Com	pany	_
490 Sav	wgrass Corp Pkwy Suite 310			
	· · · · · · · · · · · · · · · · · · ·	Addre	PSS	
Sunrise	, FL 33325			~>
		City/State a	nd Zip code	<u>.</u>
cgilbert	@gscpaus.com			:
	E-mail address:	(to be used f	or future annual report notification)	(3
For fur	ther information concerning this ma	nter, please c	all:	7)
Frank (Frank Gutta at ()		452-8813	7: 0
	Name of Person	Area Code		— ঐ
	STREET/COURIER ADDRESS Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	: :	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Please n	ed is a check for the following amounake check payable to: FLORIDA DE 00 Filing Fee \$78.75 Filing Certificate of	PARTMENT Fee &] \$78.75 Filing Fee & 🔲 \$87.50 F	ate of Status &

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607, 1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

designated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of mysburi	(Enter name of	Corporation: must include "INCORPORATED, Corp.," "Inc.," "Co," or "Corp.")	" "COMPANY," "CORPORATION,"	
(State or country under the law of which it is incorporated) (Date of country under the law of which it is incorporated) (Date of incorporation) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 7. 490 Sawgrass Corp Pkwy Suite 310 Sunrise, FL 33325 (Principal office street address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Frank Gutta Office Address: 490 Sawgrass Corp Pkwy Suite 310 Sunrise Florida 33325 (City) Florida 33325 (City) (Zip code) 9. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of mydutic and I am familiar with and accept the obligations of my position as registered agent.	South Africa			
(Current mailing address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Frank Gutta 490 Sawgrass Corp Pkwy Suite 310 (City) 9. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to camply with the provisions of all statutes relative to the proper and complete performance of mydutic and I am familiar with and accept the obligations of my position as registered agent.	(State or coun-			
7. 490 Sawgrass Corp Pkwy Suite 310 Sunrise, FL 33325 (Principal office street address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Frank Gutta Office Address: Sunrise Sunrise (City) 9. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of mydutic and I am familiar with and accept the abligations of my position as registered agent.				tual)
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Name: Sunrise 490 Sawgrass Corp Pkwy Suite 310 53 53 53 54 Sunrise Florida 33325 7 7 7 9. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of myodutic and I am familiar with and accept the obligations of my position as registered agent.	-	(Current mailing	address. if different)	 _
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	Having been nam designated in this further agree to co	ent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointme omply with the provisions of all statutes rel	of process for the above stated corporate that as registered agent and agree to act in active to the proper and complete perform	ion at the place
(Registered agent's signature)	_	Figure 1		-
10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to				

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

A. DIRECTORS	;			
⊡Chairman	Name: Brett Hendricks	_	Name:	g Wesley Van Rooyen
□Vice Chairman	Address:	_ □Vice Chairman	Address:	O Box 145
Director	147 1st Avenue	_ Director	Century Ci	ty
□President	Kenilworth, 7708	_ □President	Cape Town 7446	
□Vice President		□ Vice President		
□ Secretary	☐Treasurer	□Secretary		☐ Treasurer
□Other	Other	□Other		□Other
□Chairman	Inge Barker	_ — Chairman	Name:	
□Vice Chairman	Address: PO Box 145			
Director	Century City			
□President	Cape Town 7446	<u> </u>		
□Vice President		□Vice President		<u> </u>
□ Secretary	□Treasurer	□ Secretary		□Treasurer
□Other	Other	□Other		□Other
				}
□Chairman	Name:	□Chairman ;	Name:	:
□Vice Chairman	Address:	□ Vice Chairman	Address:	1.0
□Director _		□Director		
□ President _		□President		
□Vice President _		□Vice President		
☐ Secretary	□Treasurer	☐ Secretary		□Treasurer
□Other	□Other	Other		□Other
2.	se an attachment to report more than six (6). The added to the index when filing your Florida Deposition of Life Signature of Director Signature of Director Signature (2nd who is listed in a	partment of State Annual Reports Color or Officer	ort form.	
ne is aware that fals .817.155, F.S.	or signing this document (and who is listed in note information submitted in a document to the I. PAIS VAL ROSSEL	Department of State constitutes	s a third degree	a herein are true and that he or e felony as provided for in
J		,		



Companies and intellectual Property Commission

a margine of the amorphism

Date:

21/11/2017

Our Reference:

993173798

HAROLD BOLLEN PURCHASE E-mail: PATIENCE@KHFS.CO.ZA P O BOX 5107 **DURBAN** 4000

RE: Amendment to Company Information

Company Number: 1994/000160/07

Company Name:

DE AFRIQUE TOURS AND TRAVEL (PTY) LTD

We have received a COR21.1 (Address Change) from you dated 21/11/2017.

The COR21.1 was accepted and placed on file.

With effect from 29/11/2017, the registered address was changed to: 1ST FLOOR BLOCK B SABLE SQUARE CNR OF BOSMANSDAM AND RATANGA ROADS MILNERTON CAPE TOWN WESTERN CAPE 7441

Yours truly

Commissioner: CIPC

Please Note:

The attached certificate can be validated on the CIPC web site at www.cipc.co.za.

The contents of the attached certificate was electronically transmitted to the South African Revenue

Services.

CERTIFIED A TRUE CUPY OF THE ORIGINAL PETRUS JACOBUS DU PLESSIS SAICA REG NO: 20003051 Commissions of Oaths

1 7 FE: 2020

OFFICE BBF1, BLOCK B, 1ST FLOOR SABLE SQUARE CNR BOSMANSDAM & RATANGA ROADS CAPE TOWN, SOUTH AFRICA

The Companies and Intellectual Property Commission

of South Africa.

P.O. BOX 429, PRETORIA, 0001, Republic of South Africal Doces 756, PRETORIA

Call Centre Tel 086 100 2472, Website www.cipc.co.za



Inge Barker

Owner

Shareholding 30%

Craig Van Rooyen

<u>Owner</u>

Shareholding 30%



Shareholding 40%

(Brett Hendricks - Non-executive Director)



Shareholder / Invested in Central Group contracting Shared resources

Tourplan

Central group commercial agreements



Anedore Kessler

Managing Director / Owner 49% Tour d'Afrique owned

TRIUMPH

Andres Brossou

Managing Director / Owner 50% Tour d'Afrique owned

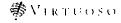
teslie Harding

Market Team Leader

Karen Salter



Market Specialist 'Virtuoso'



Nicky De Oliveira

Product and UK Market Manager

Sonia Voltolin

Market Manager Italy

Margrey Van Wyk-Pretorius

Finance Manager

Simon Jones

Director of Sales & Marketing USA (Florida)

Marie Wilcox

Marketing Manager France

Christine Ruth Krafft

Market and Reservations Germany

Representation:



Owner: Nicky Esson

USA Market, does own marketing & Reservations, using TDA full back office

Rates - Accounting - Since 2016

Joint Venture

Representation:

ADGRE

Owner: Lizle Tromp

USA Market, does own marketing

Uses TOA full back office

Rates - Accounting - Since Aug 2019

Ioint Venture

Representation:

Two - Way Street

Co-Founder & Director: Fleur Kimmich Co-Founcer & Director: Cecile Castoldi

Incentives & Events Uses TDA full back office

Rates - Accounting - Since Aug 2019

Joint Venture

CERTIFIE . A TRUE COPY OF THE ORIGINAL PETRUS JACOBUS DU PLESSIS

SAICA REG NO: 20003051 Commissional of Caths

17463 22

OFFICE BBF1, BLOCK B, 1ST FLOOR SABLE SQUARE

Hopubliek van Suld-Afrika Maatskappywet 1973 (Artifiel 64)

Republic of South Africa Companies Act 1973 (Section 64)

Registrasienonmer van Maatskappy/Registration No. of Company

FIED A TRUE COPY OF THE ORK
TRUS JACOBUS DU PLES
SAICAREG NO: 200030513
Commission Control
17 [] 3 [] 3
OFFICE BBF1, BLOCK B. 1ST FLOOD

19 94000160 5

SERTIFIKAAT VAN INLYWING

van 'n Maatskappy met 'n aandelekapitaal

CERTIFICATE OF INCORPORATION

of a Company having a share capital

Hierby word gesertifiseer dat/This is to certify that

DE AFRIQUE TOURS & TRAVEL (PROPRIETARY) LIMITED

vandag ingelyf is kragtens die Maatskappywet, 1973 (Wet 61 van 1973) en dat die Maatskappy 'n maatskappy is met 'n aandelekapitaal.

was this day incorporated under the Companies Act, 1973 (Act 61 of 1973), and that the Company is a company having a share capital.

Geteken en geseël te Preforia op hede die/Signed and sealed at Preforia this

14 th

dag van/day of

JANUARY

Eendulsend Negehonderd/

One Thousand Nine Hundred and Ninety Four.

Registrateur van Maatskappye/Registrar of Companies

Seël van die Registrasiekantoor vir Maatskappye. Seal of Companies Registration Office

Hierdie sentificate is not valid unless sealed by the seal of the Companies Registration Office.

Certificate issued by the Companies and Intellectual Property Commission on Wednesday, November 29, 2017 07:32 Certificate of Confirmation



Companies and intellectual Property Connvission

contribe of the military

PETRUS JACOBUS DU PLESSIS SAICA REG NO: 20003051

OFFICE BBF1, BLOCK B, 1ST FLOOR

SABLE SQUARE CNR BOSMANSDAM & RATANGA ROADS

CAPE TOWN, SOUTH AFRICA

Registration number

1994 / 000160 / 07

Enterprise Name

DE AFRIQUE TOURS AND TRAVEL (PTY) LTD

Enterprise Shortened Name

None provided.

Enterprise Translated Name

None provided.

Registration Date

14/01/1994

Business Start Date

14/01/1994

Enterprise Type

Private Company

Enterprise Status

In Business

Financial year end

February

Main Business/Main Object

TRAVEL AGENCY

Postal address

PO BOX 145 CENTURY CITY CAPE TOWN **WESTERN CAPE**

7441

Address of registered office

1ST FLOOR BLOCK B SABLE SQUARE

CNR OF BOSMANSDAM AND RATANGA ROADS

MILNERTON CAPE TOWN

WESTERN CAPE

7441



The Companies and Intellectual Property Commission.

P.O. BOX.429, PRETORIA, 0001, Republic of South Africa: Doces 256, PRETORIA

Call Cestre Tel 086, 100 2472, Website www.cipc.co.za.

Certificate issued by the Companies and Intellectual Property Commission on Wednesday, November 29, 2017 07:32 Certificate of Confirmation



Companies and Incidential Property Commission

र सरक्षक र्यं के सम्बद्धि

Registration number

1994/000160/07

Enterprise Name

DE AFRIQUE TOURS AND TRAVEL (PTY) LTD

Auditor

Name

KURT HOLDSTOCK

Postal Address

PO BOX 5107 DURBAN 4000

Active Directors / Officers

Surname and first names	ID number or date of birth	Director type	Appoint- ment date	Addresses
HENDRICKS, BRETT	7411065248082	Director	05/09/2013	Postal: 50 ST CLAIRE, 147 1ST AVENUE, 147 1ST AVENUE, KENILWORTH, 7708 Residential: 50 ST CLAIRE, 147 1ST AVENUE, KENILWORTH, 7708
VAN ROOYEN, CRAIG WESLEY	6703115158084	Director	09/06/2004	Postal: P O BOX 55378, SUNSET BEACH, 7441 Residential: 38 BAY BEACH AVENUE, SUNSET LINKS, SUNSET BEACH, CAPETOWN, 8001
BARKER, INGE	6904290010187	Director	01/08/1999	Postal. P.O. BOX 55378, SUNSET BEACH, 7441 Residential: 5 SCHOONER CLOSE, ATLANTIC BEACH GOLF ESTATE, MELKBOSSTRAND, CAPETOWN, 7441

CERTIFIED A TRUE COPY OF THE ORIGINAL PETRUS JACOBUS DU PLESSIS
SAICA REG NO: 20003051
Commissioner: 10 aths

17 FER 201.

OFFICE BBF1, BLOCK B, 1ST FLOOR
SABLE SQUARE
CNR BOSMANSDAM & RATANGA ROADS
CAPE TOWN, SOUTH AFRICA



The Companies and Intellectual Property Commission

of South Africa

P.O. BOKA29, PRETORIA, 0001, Republic of South Africa. Decox 256, PRETORIA

Call Centre Tel 086/100/2472, Website vwww.cipc.co.za

Document issued by the Commissioner of Companies & Intellectual Property Commission on Tuesday, February 18, 2020 at 9:46



COR 39: Director Amendments

Registration Number

1994 / 000160 / 07

Enterprise Name

DE AFRIQUE TOURS AND TRAVEL

9229430611

Companies and Intellectual **Property Commission**

a member of the dti group

ENTERPRISE INFORMATION

Registration Number

1994 / 000160 / 07

Enterprise Name

DE AFRIQUE TOURS AND TRAVEL

Tracking Number

9229430611

Registration Date

14/01/1994

Enterprise Type

Private Company

Enterprise Status

In Business

Addresses

POSTAL ADDRESS

PO BOX 145 CENTURY CITY

CAPE TOWN **WESTERN CAPE**

7441

ADDRESS OF REGISTERED OFFICE

1ST FLOOR BLOCK B SABLE SQUARE

CNR OF BOSMANSDAM AND RATANGA ROADS

MILNERTON CAPE TOWN

WESTERN CAPE

7441

DIRECTORS

Surname	hoe	Firet	Name
Surname	and	THE ST	THAT IS:

Type

Status

ID Number /

21/05/2020

Date

Appoint. Date

Address

BARKER, INGE

Director

Active

Date of Birth 6904290010187

1999-08-01

Postal PO BOX 145 CENTURY CITY, CAPE TOWN, WESTERN **CAPE 7446**

Residential 5 SCHOONER CLOSE, ATLANTIC BEACH GOLF ESTATE. MELKBOSSTRAND, VÆSTERN

CAPE 7441

HENDRICKS, BREIL

Director

Signature

Signature

Active

7411065248082

2013-09-05

Postal 50 ST CLAIRE, 147 1ST AVENUE, 147 1ST AVENUE, WESTERN CAPE, 2708

Residential 50 ST CLAIRE, 147 1ST AVENUE, KENÎLÎVORTH. WESTERN CAPE, 7708

 $\overline{\sigma}$

Postal PO BOX 145, CENTURY CITY, CAPE TOWN, WESTERN CAPE, 7446

Residential 3d BAY BEACH

AVENUE, SUNSET LINKS. SUNSET BEACH, WESTERN CAPE, 8001

VAN ROOYEN, CRAIG WESLEY

Director

Active

6703115158084

2004-06-09

21/02/2020

Date

NB: At least one of the signatories must sign the COR39 form.

Signature

معلان

Page 1 of 1



Document issued by the Commissioner of Companies & Intellectual Property Commission on Tuesday, February 18, 2020 at 9:46



COR 39: Director Amendments

Registration Number

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Enterprise Name

DE AFRIQUE TOURS AND TRAVEL

9229430611

Companies and Intellectual **Property Commission**

a member of the dti group

ENTERPRISE INFORMATION

Registration Number

1994 / 000160 / 07

Enterprise Name

DE AFRIQUE TOURS AND TRAVEL

Tracking Number

9229430611

Registration Date

14/01/1994

Enterprise Type

Private Company

Enterpnse Status

In Business

Addresses

POSTAL ADDRESS

PO BOX 145

CENTURY CITY

CAPE TOWN **WESTERN CAPE**

7441

ADDRESS OF REGISTERED OFFICE

1ST FLOOR BLOCK B SABLE SQUARE

CNR OF BOSMANSDAM AND RATANGA ROADS

MILNERTON CAPE TOWN

WESTERN CAPE

7441

DIRECTORS

Surname and First Names

Type

Status

ID Number / Date of Birth Appoint. Date

Address

BARKER, INGE

Director

Active

6904290010187

21/02/3020

Date

1999-08-01

Postal PO BOX 145, CENTURY CITY, CAPE TOWN, WESTERN CAPE, 7446

Residential 5 SCHOONER CLOSE, ATLANTIC BEACH GOLF ESTATE, MELKBOSSTRAND, WESTERN CAPE, 7441

HENDRICKS, BRETT

Director

Active

7411065248082

2013-09-05

Postal 50 ST CLAIRE, 147 1ST AVENUE, 147 1ST AVENUE, WESTERN CAPE, 7708

Residential-50 ST CLAIRE, 147 IST AVENUE, KENILWORTH, WESTERN CAPE, 7708

Active

6703115158084

2004-06-09

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Residential 38 BAY BEACH AVENUE, SUNSET LINKS SUNSET BEACH, WESTERN CAPE, 8001

VAN ROOYEN, CRAIG WESLEY

Director

Date

Date

NB: At least one of the signatories must sign the COR39 form.

Signature

Signature

Page 1 of 1

