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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # F57297

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HORIZO	NS TRAVEL, INC.				
Principa! Place o	f Business	Mailing Address			NE MINNE MENTE MINNE MENTE MENTE FRANCISCO
Principal Place of Business % CARLOS SALTZ 8941 SW 17TH ST. MIAMI FL 33165		% CARLOS SALTZ 8941 SW 17TH ST. MIAMI FL 33165		3. Date Incorporated or Qualified 3a. Date of Last Report 05/01/1995	
				12/07/1981 4. FEI Number	Applied For
. Principal Plac	e of Business	2a. Mailing Address		NOT APPLICABLE	Not Applicable
		Suite. Apt. #, etc.			\$8.75 Additional
- Suite Apt #, 1	etc	27		5. Certificate of Status Desired	Fee Required
City & State		Oity & Stale		6. Election Campaign Financing	\$5.00 May Be
City & State		28		Trust Fund Continuestion	Added to Fees
'1Zıp	Country	Zip	Country	8. This corporation has liability for inf	tangible tax under s. 199 032,
i]	25	29	30	Florida Statutes	
	9. Name and Address of t	Current Registered Agent		10. Name and Address of New Re	gistered Agent
			81 Name		
SALTZ, E	VA		82 Street Add	tress (P.O. Box Number is Not Acceptable)
8941 SW					
MIAMI, FI			83		
33165			84 City		FL 85 Zip Gode
			,	oration submits this statement for the purp and of directors. Thereby accept the appoi	con of changing its registered office
				ard of directors. Thereby accept the appoi	mineri, ar registeres agent i par
or registere familiar with RIGNATURE	id agent, or both, in the State h, and accept the obligations of Signature typed or product a telefoliquete	of Fibrida South Drange was addition of Section 607.0505, Florida Statute	RITE Beginner Ajantssjeat av reger	and the residence	[JATE
or registere familiar with SIGNATURE	d agent, or both, in the State n, and accept the obligations of Signature tiped or process cancel or number OF FIGE	of Figure 25 Statute of Section 607.0505, Fronda Statute one tagest and the County of the CORS	RITE Bug cond Apart saji at an resp.		[/ATE
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SIGNATURE:

I do hereby certify that the information supplied with this fining is voluntarily fernished and does not qualfy for the exemption stated in Soction 119.07(3)(k). Honda Statutes. I turner certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that rey signature shall have the same logal effect as if made under oath, that I am an officer or director of the corporation or the receiver or turner cereiver or turner appears in Block 12 or Block and changed or on an attachment with an address.

IGNATURE:

SIGNATURE:

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

To provide the exemption stated in Social Address and that rey signature shall have the same logal effect as if made under oath, that my name appears in Block 12 or Block and changed or on an attachment with an address.

4/1/96.

305)553-6471