

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2002 8:00 am
Secretary of State
 05-07-2002 90244 045 ***150.00

DOCUMENT # F78446

1. Entity Name
TRAVEL ADVISORS, INC.

Principal Place of Business
 732 NE 18TH AVE
 FT LAUDERDALE FL 33304-3410

Mailing Address
 732 NE 18TH AVE
 FT LAUDERDALE FL 33304-3410



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
59-2187471

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

OLSON, ROBERT H
106 SE 10TH STREET
FORT LAUDERDALE FL 33301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in this State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title in parentheses

(NOTE: Registered Agent signature is required when reactivated)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so (See criteria on back) ☐

FILE NOW!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDS HOGAN, JOHN E. 732 NE 18TH AVE FT LAUDERDALE FL 33304-3410	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(3)(b), Florida Statutes. I further 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 11 or Block 12 as changed, or on an attachment with an address, with all other like information.

SIGNATURE:

John E. Hogan
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
John E. Hogan

APRIL 16, 2002 (954)
467-6262

Division of Corporations

Uniform Business Report

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Document Number

F78446

Business Entity Name

TRAVEL ADVISORS, INC.

FEI Number

592187471

FEI Number Status

☐ Applied For ☐ Not Applicable ☒ Current

Certificate of Status Desired ☐ Yes ☒ No

Principal Place of Business

Address

732 NE 18TH AVE

Suite, Apt. #, etc.

City, State

FT LAUDERDALE

FL

Zip Code & Country

333043410

Mailing Address

Address

732 NE 18TH AVE

Suite, Apt. #, etc.

City, State

FT LAUDERDALE

FL

Zip Code & Country

333043410

Name And Address of Registered Agent

Name (Last, First, Middle, Title)

OLSON

ROBERT

H

Corporate Name

Address

106 SE 10TH STREET

Suite, Apt. #, etc.

City, State

FORT LAUDERDALE

FL

Zip Code & Country

33301

If Registered Agent (RA) is changed, the new RA must type their name in the 'Registered Agent Signature' block below.
RA signature MUST be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature

Continue

Reset

Start Over

THIS ALL GOT THE FELOW SITE AFTER ONLY LOAD THAT WOULD 3695