

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

FILED
Jun 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **F96000003677 (9)**

1. Corporation Name
TRAVEL SYSTEMS ABROAD, INC.



Principal Place of Business

Mailing Address

**1680 MICHIGAN AVE
804
MIAMI BEACH FL 33139
US**

**1680 MICHIGAN AVE
804
MIAMI BEACH FL 33139
US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip Country

29

30

3. Date Incorporated or Qualified

07/22/1996

4. FEI Number

86-0528725

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 owes or has paid the current year Intangible
Personal Property Tax due June 30 ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**RICKERS, JOERG
1680 MICHIGAN AVENUE
SUITE 804
MIAMI BEACH FL 33139**

81 Name

VIRGINIA MORALES

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

1680 MICHIGAN AVENUE

83

SUITE #804

84

City **MIAMI BEACH**

FL

85

Zip Code **33139**

11. Pursuant to the provisions of Sections 607.0502 and 607.1509, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, as shown 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 of person or persons authorized to register agent and file applicable

(NOTE: Registered Agent signature required when re-instating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

**P
NAME COTTAM, JAMES J
STREET ADDRESS 1746 E. JEANINE DRIVE
CITY-ST-ZIP TEMPE AZ 85284**

TITLE ☐ DELETE

**S
NAME COTTAM, CAROL
STREET ADDRESS 1746 E. JEANINE DRIVE
CITY-ST-ZIP TEMPE AZ 85284**

TITLE ☐ DELETE

**V
NAME KRAUSE, HANS
STREET ADDRESS IM SONNENPUTZ 19, 53129 BONN
CITY-ST-ZIP GERMANY**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

8000002565348

06/15/98-01004-037

\$\$\$150.00

14. I 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 in an attachment with an address.

SIGNATURE

V. Morales - Virginia Morales

4/10/98 (305) 538-6081

CR2E034 (10/97)