\$ECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON 6R BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

APPROVED AND FILED

1997 OCT -6 PM 1: 03

SECRETARY OF CTATE

DOCUMENT # F9600004000 (3) TRAVELMAX INTERNATIONAL, INC.					TALLAHASSEE, FLORIDA	
Principal Pla	ace of Business	Mailing Addr	oss	····		- rearrag line seria binis danis danis danis baril baril baril baril baril baril baril baril baril
3388 VIA LIDO		3388 VIA LIDO				
NEWPORT BE	ACH CA 92663	NEWPORT BEA	CH CA 82663			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified 38. Date of Last Report
						08/06/1996
2. Principal	rincipal Place of Business 2a. Mailing Address					4. FEI Number Applied For
21						33-0669843 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22 27 City & State City & State						Fee Required
23 City & St	ate	<u>├</u> ─┐	City & State			6. Election Campaign Financing \$5.00 May Be
Zip	Country	28 Zip		Country	,	Trust Fund Contribution Added to Fees
24	25	29	30	Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
	9. Name and Address of C	urrent Registered Age				10. Name and Address of New Registered Agent
CO	RPORATION SERVICE COMPA	ANY		81	Name	9
120	1 HAYS STREET			82	Street	t Address (P.O. Box Number is Not Acceptable)
TALLAHASSEE FL 32301-2525					ļ	
				83		i
				84	City	B5 Zip Code
11 Purcuan	t to the provisions of Sections 60	7 0502 and 607 1508 EL	orido Ctatutas t	bo obove	n namad	d corporation submits this statement for the purpose of changing its registered
Office of	registered agent, or both, in the a	State of Florida. Such ch	iange was autho	orized by	the corp	rporation's board of directors. I hereby accept the appointment as registered
-	am familiar with, and accept the o	obligations of, Section 6	07.0505, Florida	Statutes	3.	
SIGNATURE	Signature, typed or printed name of register	ed agent and lifte if appricable.	(NOTE Reg	islared Age	ni s gnalure	re required when reinstating) DATE
12.		S AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	CCEO	<u> </u>	DELETE	1.1 THILE		CFO Change Addition
NAME	ALVERSON, WILLIAM M	•		1.2 NAME		MICHAEL SEDEROFF
STREET ADDRESS		00		1.3 STREET		
CITY-ST-ZIP TITLE	NEWPORT BEACH CA 926		DELETE	1.4 CITY-S	T-ZIP	
NAME	PRESCOTT, LOU	۶.	DECEME	2.1 TITLE 2.2 NAME		MARK DOUMAN
STREET ADDRESS	MANA AALHIADADE DO			2.2 NAME 2.3 STREET	ABBOTEC	
CITY-ST-ZIP	NEWPORT BEACH CA 926	60		2.3 STREET 2.4 CITY-S		NEW PORT BEACH, LA 92630
TITLE	DS			31 TITLE	21-211	PRESIDENT , X Change Addition
NAME	GUEST, MARK			3.2 NAME		MARK GUEST
STREET ADDRES	2700 NEWPORT BLVD., #3			3.3 STREET	ADDRESS	
CITY-ST-ZIP	NEWPORT BEACH CA 926			3.4. CITY - S	ST-ZIP	
TITLE	M	\mathcal{D}		4.1 TITLE		2000023180423 -10/10/9701111029
NAME	PAISLEY, DALE			4. 2 NAME		-10/10/9701111029
STREET ADDRESS				4.3 STREET		****\$S0.00 ****\$S0.00
CITY-ST-ZIP TITLE	SANTA ANA CA 92705			4.4 CITY-S	Y-ZIP	
NAME		L		5.1 TITLE 5.2 NAME		Change Addition
STREET ADDRESS				5.3 STREET	AUUBEGG	
CITY-ST-ZIP				5.4 CITY-S'	ı	
TITLE				6.1 TITLE		Chapal TJ. Addition
NAME				6.2 NAME		- NG1.76
STREET ADDRESS				6.3 STREET	address	יישועוי
CITY-ST-ZIP	,			6.4 CITY - S1	I - ŽIP	Į,
44 Lab bare	uni applification tha information a	والمراب والمنازاة بمازياته بالالبور المرجوز المري	and a second of	4.1		1 1 0 1 445 65(6)(0) 50 71 60

I do hereby certify that the information supplied with this filling 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 on an attachment with an address.

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