**FILED** 

## **2002 UNIFORM BUSINESS REPORT (UBR)**

## Feb 28, 2002 8:00 am Secretary of State F96000006772 DOCUMENT # FUTURISTIC VACATIONS, INC. 02-28-2002 90045 043 \*\*\*150.00 Principal Place of Business Mailing Address 110 E BROWARD BLVD 110 E BROWARD BLVD **SUITE 1101 SUITE 1101** FT LAUDERDALE FL 33301 FT LAUDERDALE FL 33301 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0696127 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SMITH, DENNIS D Street Address (P.O. Box Number is Not Acceptable) TRIPP, SCOTT, CONKLIN & SMITH 110 SE 6TH STREET FT LAUDERDALE FL 33301 City Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CDCE TITLE ☐ Delete TITLE ☐ Addition EGAN, MICHAEL NAME NAME 110 E. BROWARD BLVD STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 33301 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Z Delete TITLE ☐ Addition ARTHUR, ROSALIE NAME NAME STREET ADDRESS 110 E. BROWARD BOVD STREET ADDRESS FT LAUDERDALE FL 33301 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME HANRATTY, JOHN NAME STREET ADDRESS 110 E BROWARD BLVD STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33031 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition ALLEN, CELESTE V NAME NAME 110 E BROWARD BLVD STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33301 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 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 if

SIGNATURE: SIGNATURE AND TYPED OF PRINTED FOR PRINTED COLESTO V. Allen 2/5/02 954-522-1440

changed, or on an attachment with an address, with all other like empowered