



THE UNITED STATES  
CORPORATION  
COMPANY

# F99000005699

ACCOUNT NO. : 072100000032

REFERENCE : 457329 4144A

AUTHORIZATION :

*Patricia Puyit*

COST LIMIT : \$ 70.00

ORDER DATE : November 3, 1999

ORDER TIME : 12:21 PM

600003034046--1

ORDER NO. : 457329-020

CUSTOMER NO: 4144A

CUSTOMER: Rosa Maria Ancheta, Legal Asst  
Holland & Knight  
Suite 3000  
701 Brickell Avenue  
Miami, FL 33131

FOREIGN FILINGS

NAME: BESTOUR, INC.

7

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
99 NOV -3 PM 3:49

DEPARTMENT OF REVENUE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL 32301

RECEIVED

99 NOV -3 PM 1:44

*3/2 11/13/99*

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS  
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE  
STATE OF FLORIDA:

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DIVISION OF CORPORATIONS  
SEP 10 1989  
PM 3:45

1. Bestour, Inc.

(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION", or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. New Jersey

(State or country under the law of which it is incorporated)

3. \_\_\_\_\_

(FEI number, if applicable)

4. August 24, 1989

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. Upon Qualification

(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.155, F.S.))

7. 80 S.W. 8th Street, Suite 2601, Miami, Florida 33130

(Current mailing address)

8. Tour Operator

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent:

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida, 32301

(Zip Code)

10. Registered agent acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Corporation Service Company

Deborah D. Skipper

(Registered agent's signature) (Officer)

**Deborah D. Skipper**  
as its agent

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: See attached list of directors

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: See attached list of directors

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: See attached list of directors

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

B. OFFICERS

President: See attached list of officers

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

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Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.

*Barry S. Kaplan*

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Barry S. Kaplan, Vice President

(Typed or printed name and capacity of person signing application)

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STATE OF  
NEW YORK  
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CLERK OF COURTS

**RIDER**  
**OFFICERS/DIRECTORS**  
**OF**  
**BESTOUR, INC.**

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Director and President:

Phil Bakes  
80 S.W. 8<sup>th</sup> Street, Suite 2601  
Miami, Florida 33130

Director, Exec. Vice President,  
Secretary and Treasurer:

Andrew C. McKey  
80 S.W. 8<sup>th</sup> Street, Suite 2601  
Miami, Florida 33130

Director, Exec. Vice President and  
Assistant Secretary:

Barry S. Kaplan  
80 S.W. 8<sup>th</sup> Street, Suite 2601  
Miami, Florida 33130

Chief Financial Officer:

Rob Erickson  
80 S.W. 8<sup>th</sup> Street, Suite 2601  
Miami, Florida 33130

STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

BESTOUR, INC.

*I, the Treasurer of the State of New Jersey,  
do hereby certify that the above-named  
New Jersey Domestic Profit Corporation was  
registered by this office on August 24, 1989.*

*As of the date of this certificate, said business  
continues as an active business in good standing  
in the State of New Jersey, and its Annual Reports  
are current.*

*I further certify that the registered agent and  
registered office are:*

*Nationwide Information Services, Inc.  
208 W State St  
Trenton, NJ 08608*

*Continued on next page . . .*

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STATE OF NEW JERSEY

STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

BESTOUR, INC.



IN TESTIMONY WHEREOF, I have  
hereunto set my hand and  
affixed my Official Seal  
at Trenton, this  
19th day of October, 1999

*Roland M Machold*

Roland M Machold  
Treasurer

99 NOV - 3 PM  
TREASURER'S OFFICE