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1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # CO2427

1. Corporation TRAVEL	CONSULTANTS OF ORLAN						
Principal Place	of Business	Mailing Address					
634 VIRGINIA DR 634 VIRGINIA DR							
ORLANDO FL 32803 ORLANDO FL 32803 US US					DO NOT WRITE IN THIS SPACE		
US		US			3. Date Incorporated or Qualifed		
					02/09/1983		
2 Principal Pl	ace of Business	2a. Mailipg Address /			4. FEI Number	Apr	olied For
2. Findipart	4.7/ · · · · · · · · · · · ·	26 634 Vvide	(a) D		59-2261943	Not	Applicable
Suite, Apt. i	# etc.	Suite, Apt. #, etc.	Tex 10			\$8.75 A	dditional
22	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	27			5. Certifcate of Status Desired	Fee Red	quired
City & State	· · · · · · · · · · · · · · · · · · ·	City & State 1	11	1	6. Election Campaign Financing	\$5.00 ١	May Be
23	lends the	28 Prando	The		Trust Fund Contribution	Added to	
Zip	Country	Zip, N 3	Country		8. This corporation owes the current year	Intangible	
24 308	05 25	29 30102 30	0		Personal Property Tax.		□No
<u></u>	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registere	d Agent	
			81 Na	ame			,
	., NITA		82 St	reet Addre	ess (P.O. Box Number is Not Acceptable)		
634 VIRGINIA DR.			0.	oz oliest Address (ts. box Hallist ts.			
ORL/	ANDO FL 32803		83				
			84 Ci	4.	<u> </u>	. 85 Zip C	ode
			f	-	F	L	
office or re agent. I ar SIGNATURE	egistered agent, or both, in the State on familiar with, and accept the obligation of the state of the state of the obligation of the obliga	of Florida. Such change was auti- ations of, Section 607.0505, Florida	ionzed by the	corporation		3-1-9	9_
12.	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	SDT	☐ DELETE	1.1 TITLE			Change	☐ Addition
NAME	BULL, NITA		1.2 NAME				
STREET ADDRESS	634 VIRGINIA DR.						
CITY-ST-ZIP	ORLANDO, FL 00000		1.3 STREET ADD	RESS			
TITLE			1.3 STREET ADD 1.4 CITY-ST-ZIP				
	DP	☐ DELETE				☐ Change	Addition
NAMÉ	DP BULL, HARRY	☐ DELETE	1.4 CITY-ST-ZIP			Change	Addition
NAME STREET ADDRESS	- ·	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE			☐ Change	Addition
	BULL, HARRY	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	RESS			_
STREET ADDRESS	BULL, HARRY 634 VIRGINIA DR.	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD	RESS		☐ Change	Addition
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CITY-ST-ZIP 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 on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: