## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

THE TRAVEL CORPORATION, INC.

						-	
Principal Place of Business Mailing Address					r remiste mate jamur meren baber ander dide dides midte dides dides dides dides dides dides dides dides dides		
% 8603 SOUTH DIXIE HWY SUITE 307 % 8603 SOUTH DIXIE H MIAMI FL 33143 MIAMI FL 33143			ie hwy., si	WY SUITE 307			
						3. Date incorporated or Qualified 3a. Date of Last Recort 05/01/1995	
2. Principal Pl. 21	ace of Business	2a. Mailing Address 26	Mailing Address			4. FEI Number Applied For 59-2384109 Not Applied In Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional	
22		27				5. Certificate of Status Desired Fee Required	
City & State		City & State	n			6. Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution Added to Fees	
Zip <b>24</b>	Country 25	Zip	Cou	ntry		8. This corporation has liability for intangible tax under s 199.032,	
24	9. Name and Address of Curren	t Registered Agent	30			Florida Statutes  Yes  No  10. Name and Address of New Registered Agent	
		1 , logicio su rigoni		B1	Name	IV. Halle Bild Address of Hew neglistered Agent	
GREEN	nberg, Suzanne						
8603 SOUTH DIXIE HWY., SUITE 307				82	Street Addr	dress (P.O. Box Number is Not Acceptable)	
MAMI	FL 33143			83			
				84	04.		
					City	FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607,0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, 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, typed or printed name of registered agent a			Agen	t signature require	red when reinstating) DATE	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	GREENBERG, SUZANNE	DELETE	1. 1 7			☐ Change ☐ Addition	
STREET ADDRESS	8003 S DIXIE HWY 307		12 NA				
CITY-ST-ZIP	MIAMI FL		1.3 STREET ADDRESS 1.4 CCY-ST-ZIP				
TITLE		DELETE	2. 1 Ti		1.219	Change Addition	
NAME			2 2 NA			Clouding Livering	
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP			2.4 C(				
TITLE		☐ DELETE	3. 1 Ti			Change Addition	
NAME			3.2 NA	ME			
STREET ADDRESS			3.3. \$1	REET	ADDRESS		
CiTY - ST - ZIP			3 4 CI	Y-S1	1 - ZIP		
TITLE		☐ DELETE	4 1 TI	1E		Change Addition	
NAME			4.2 NA	ME			
STREFT ADDRESS			4.3 \$1	HEET :	ADDRESS		
CITY-ST-ZIP			4.4 CiT	Y-\$1	T-ZIP		
TITLE		☐ DELETE	5.1 70	LE		Change Addition	
NAME			5 2 NA	Μê			
STREET ADDRESS			5 3 ST	REET	ADDRESS		

14. I do horeby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 cath; 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.

5.4 CITY-ST-ZIP

63 STREET ADDRESS

64 CITY-ST-ZIP

6. 1 TITLE

6.2 NAME

DELETE

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE: 542 AUNE GROEN BORG STERAME OF BIGHTING OFFICER OR DIRECTOR

Freenberg, Pres.

4/11/ 96 305-667-5200

☐ Addition