FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -7 AM 11:44

DOCUMENT # **H19796** **(2)**

1. Corporation Name
LEGAL TRAVEL SERVICES, INC.

Principal Place of Business	Mailing Address
175 NW W FIRST AVENUE COURTHOUSE CENTER. SUITE 1730 MIAMI FL 33128-1844	175 NW W FIRST AVENUE COURTHOUSE CENTER. SUITE 1730 MIAMI FL 33128-1844

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified	3a. Date of Last Report
09/06/1984	03/08/1994

2. Principal Place of Business	2a. Mailing Address
21 800 BRICKELL AVENUE	26 800 BRICKELL AVENUE
Suite, Apt. #, etc. 22 PENTHOUSE 2	Suite, Apt. #, etc. 27 PENTHOUSE 2
City & State 23 MIAMI, FL	City & State 28 MIAMI, FL
Zip / Country 24 33134-2944 / 25	Zip / Country 29 33134-2944 / 30

4. FEI Number: 59-2444601 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BIERMAN, DONALD I. ~~175 N W FIRST AVENUE~~ ~~COURTHOUSE CENTER, SUITE~~ 1730 ~~MIAMI~~ FL 33128-1835	81 Name 82 Street Address (P.O. Box Number is Not Acceptable): 800 BRICKELL AVENUE, PENTHOUSE 2 83 84 City: MIAMI, FL **FL** 85 Zip Code: 33134-2944

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: _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	☑ Change ☐ Addition
NAME	BIERMAN, DONALD I.	1.2 NAME	
STREET ADDRESS	175 N W FIRST AVENUE	1.3 STREET ADDRESS	800 BRICKELL AVENUE, PENTHOUSE 2
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	MIAMI, FL 33134-2944
TITLE	V	2.1 TITLE	☑ Change ☐ Addition
NAME	SHOHAT, EDWARD R	2.2 NAME	
STREET ADDRESS	175 N W FIRST AVE	2.3 STREET ADDRESS	800 BRICKELL AVENUE, PENTHOUSE 2
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	MIAMI, FL 33134-2944
TITLE	S	3.1 TITLE	☑ Change ☐ Addition
NAME	RUFFNER, CHARLES L	3.2 NAME	601 BRICKELL KEY DRIVE - SUITE 507
STREET ADDRESS	175 N W FIRST AVENUE	3.3 STREET ADDRESS	~~800 BRICKELL AVENUE, PENTHOUSE 2~~
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	~~MIAMI FL 33134-2944~~ MIAMI, FL. 33131-2623
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 added by this amendment with an address.

SIGNATURE: X _____ 3/27/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0487433 FP