FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT

SIGNATURE:

May 01 1998 8:00am **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 **DIVISION OF CORPORATIONS DOCUMENT #** H60095 VANYTRAVEL, INC. Principal Place of Business Mailing Address % JERRY M. LANG 17821 BISCAYNE BLVD. 17821 BISCAYNE BLVD AVENTURA FL 33160 DO NOT WRITE IN THIS SPACE **AVENTURA FL 33160** Date Incorporated or Qualified 06/04/1985 2. Principal Place of Business 28. Mailing Address Applied For 59-2650651 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible ☐ Yes 29 Personal Property Tax due June 30. 24 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 LANG. JERRY M. 21141 N.E. 21ST PLACE 82 Street Address (P.O. Box Number is Not Acceptable) **NORTH MIAMI BEACH FL 33179** 83 84 City 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 and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (10/97 OFFICERS AND DIRECTORS 13. DELETE Change Addition 1.1 TITLE TITLE LANG, JERRY M. MARAF 12 NAME 21141 N.E. 21ST PLACE STREET ADDRESS 1.3 STREET ADDRESS NORTH MIAMI BCH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition **BIGIO. DORIS** NAME 2.2 NAME 21141 N.E. 21ST PLACE 2.3 STREET ADDRESS STREET ADDRESS NORTH MIAMI BCH FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE MALK 32 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 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 frue 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 used 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 affaction of the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver of the recei

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FLORIDA DEPARTMENT OF STATE

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