

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

FILED
May 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **H75557** (9)
1. Corporation Name
ACC TOURS, INC.



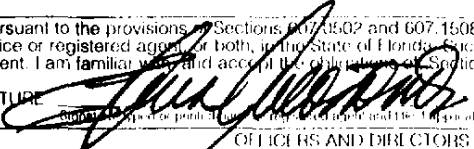
Principal Place of Business C/O ROLAND A. LANGEN 112 S. HIBISCUS ISLAND MIAMI FL 33139	Mailing Address C/O ROLAND A. LANGEN 112 S. HIBISCUS ISLAND MIAMI FL 33139
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 09/11/1985	4. FEI Number 59-2584305	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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No		

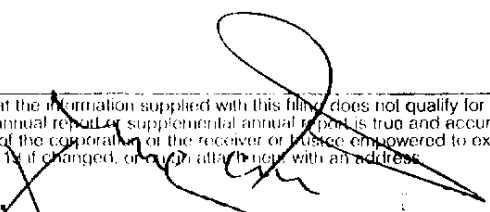
9. Name and Address of Current Registered Agent LANGEN, RONALD A. 112 S. HIBISCUS ISLAND MIAMI FL 33139				10. Name and Address of New Registered Agent 81 Name ELENA ARTAMENDI 82 Street Address (P.O. Box Number is Not Acceptable) 3421 S.W. 112 AVENUE 83 84 City MIAMI FL 85 Zip Code 33165			
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11. 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, which 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 607.0506, Florida Statutes.

SIGNATURE  APRIL 29, 1998 DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PTS	☐ DELETE		1.1 TITLE	☐ Change ☐ Addition		
NAME	CARBONE, ANTONIO CARLOS			1.2 NAME			
STREET ADDRESS	11531 SW 93 ST.			1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL			1.4 CITY-ST-ZIP			
TITLE	D	☐ DELETE		2.1 TITLE	☐ Change ☐ Addition		
NAME	CARBONE, MEIRE P.A.			2.2 NAME			
STREET ADDRESS	11531 SW 93 ST.			2.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL			2.4 CITY-ST-ZIP			
TITLE	D	☐ DELETE		3.1 TITLE	☒ Change ☐ Addition		
NAME	ARTAMENDI, ELENA			3.2 NAME			
STREET ADDRESS	3421 SW 112TH AVE			3.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL			3.4 CITY-ST-ZIP			
TITLE	D	☐ DELETE		4.1 TITLE	☒ Change ☐ Addition		
NAME	SANTOS, JAIR C.			4.2 NAME			
STREET ADDRESS	271 SW 30TH RD			4.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE		5.1 TITLE	☐ Change ☐ Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		☐ DELETE		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 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 in an attachment with an address.

SIGNATURE  4/28/98 (305) 579-8688

CR2E034 (10/97)