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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham' .

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

H86293

(8)

BILL BROWN TRAVEL CORP.

cipal Place of Business	Mailing /

FILED Mar 26 1998 8:00am Secretary of State



r micipai riaci	e of ousil kiss	Mailing Address		
	AVENUE, NE . SUITE #213	111 SECOND AVENUE.		
ST. PETERSB	URG FL 33701	ST. PETERSBURG FL 33	3701	DO NOT WRITE IN THIS SPACE
ł				3. Date Incorporated or Qualified
				11/18/1985
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		59-2614151 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.		SR 75 Additional		
27		5. Certificate of Status Desired Fee Required		
City & State City & State			6, Election Campaign Financing \$5.00 May Be	
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25	29	30	Personal Property Tax due June 30. Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered Agent
KA:	SSIS, NAJLA Y.		81 Nam	
	SECOND AVENUE, NE , SUITE	#213		AR GENNE FARLLY at Address (P.O. Box Number is Not Acceptable)
	PETERSBURG FL 33701	- " - · •	111	SECOND AVE NE . # 213
J			83	
	_		24 - 27	lo-1 7: 0.1
	•		B4 City	ST PETE, FL 85 Zip Code 3370/
11, Pursuant t	to the provisions of Sections 607.050	02 and 607.1508, Florida Statu		
office or re	egistered agent, or both, in the State	e of Florida. Such change was ations of Section 607 0505. F	authorized by the co	d corporation submits this statement for the purpose of changing its registered progration's board of directors. I hereby accept the appointment as registered
	in rainings with an Occept the vary	and the Section Cor. 0303, Fr	orida Statutes.	3/20/9V
SIGNATURE	Signature, typied or printed name of registered age	ont sod-title it applicable (NO	TE: Registered Agent signate	re required when reinstating) DATE
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	SD	⊠ DEL e te	1.1 TITLE	↑P D ☐ Change 🔀 Addition
NAME	CARR, MARLINE Y.		1.2 NAME	FARIEY GIENNE.
STREET ADDRESS	111 SECOND AVE NE #213		1.3 STREET ADDRESS	FARLEY GLENN E. # 2/3
CITY-ST-ZIP	ST. PETERSBURG FL		1.4 CITY - ST - ZIP	ST PETE, FL. 33701
TITLE	PD	DELETE	2.1 TITLE	Change Addition
NAME	KASSIS, NAJLA Y.	,	2.2 NAME	' - ' -
STREET ADDRESS	111 SECOND AVE NE #213		2.3 STREET ADDRESS	.
CITY-ST-ZIP	ST. PETERSBURG FL		2. 4 City - St - ZiP	
TITLE	OT TETENODONO TE	DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	Twomon Linear Twomon
STREET ADDRESS			3.3 STREET ADDRESS	.
				'
CITY-ST-ZIP		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	Change Addition
		المال		Li change Li Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP		CI DELETE	4.4 CITY-ST-ZIP	06
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_\$7_3ID			CAPITY OF 7ID	

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 arinual 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.

CIGNATURE A WILL Y. KA MAIN!

2/10/98 (815)852-2468