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Feb 21 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # H96712 (5)
1. Corporation Name
E.B. TRAVEL, INC.



Principal Place of Business
1024 KANE CONCOURSE
BAY HARBOR ISLAND FL 33154

Mailing Address
1024 KANE CONCOURSE
BAY HARBOR ISLAND FL 33154-2107

3. Date Incorporated or Qualified
01/30/1986

3a. Date of Last Report
01/26/1996

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip
24

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip
29
Country
30

4. FEI Number
59-2630233

5. Certificate of Status Desired
6. Election Campaign Financing
Trust Fund Contribution
7. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Applied For
Not Applicable

\$8.75 Additional
Fee Required

\$5.00 May Be
Added to Fees

Yes No

9. Name and Address of Current Registered Agent
BLUM, ETHEL
1024 KANE CONCOURSE
BAY HARBOR ISLAND FL 33154

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 and fee if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

| | | |
|-----------------|----------------------------|--------|
| TITLE | PD | DELETE |
| NAME | BLUM, ETHEL | |
| STREET ADDRESS | 1024 KANE CONCOURSE | |
| CITY - ST - ZIP | BAY HARBOR ISLAND FL 33154 | |
| TITLE | DST | DELETE |
| NAME | BLUM, ROGER | |
| STREET ADDRESS | 1024 KANE CONCOURSE | |
| CITY - ST - ZIP | BAY HARBOR ISLAND FL 33154 | |
| TITLE | VD | DELETE |
| NAME | BLUM, CAROL | |
| STREET ADDRESS | 1024 KANE CONCOURSE | |
| CITY - ST - ZIP | BAY HARBOR ISLAND FL 33154 | |
| TITLE | | DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY - ST - ZIP | | |
| TITLE | | DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY - ST - ZIP | | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | | | |
|---------------------|-----------------------|--------|----------|
| 1.1 TITLE | PRESIDENT | Change | Addition |
| 1.2 NAME | ETHEL BLUM | | |
| 1.3 STREET ADDRESS | 5660 COLLINS AVE #11E | | |
| 1.4 CITY - ST - ZIP | MIAMI BEACH, FL 33140 | | |
| 2.1 TITLE | VICE PRESIDENT | Change | Addition |
| 2.2 NAME | EDWARD DUBLIN | | |
| 2.3 STREET ADDRESS | 5660 COLLINS AVE #11E | | |
| 2.4 CITY - ST - ZIP | MIAMI BEACH, FL 33140 | | |
| 3.1 TITLE | SEC - TREAS | Change | Addition |
| 3.2 NAME | ROGER BLUM | | |
| 3.3 STREET ADDRESS | 5660 COLLINS AVE #11E | | |
| 3.4 CITY - ST - ZIP | MIAMI BEACH, FL 33140 | | |
| 4.1 TITLE | | Change | Addition |
| 4.2 NAME | | | |
| 4.3 STREET ADDRESS | | | |
| 4.4 CITY - ST - ZIP | | | |
| 5.1 TITLE | | Change | Addition |
| 5.2 NAME | | | |
| 5.3 STREET ADDRESS | | | |
| 5.4 CITY - ST - ZIP | | | |
| 6.1 TITLE | | Change | Addition |
| 6.2 NAME | | | |
| 6.3 STREET ADDRESS | | | |
| 6.4 CITY - ST - ZIP | | | |

14. I do 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 on an attachment with an address.

SIGNATURE: [Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Feb 17, 1997 (303) 866-6203

CR2E034 (9/96)