

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

FILED

**Jun 09 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # J19913 (9)
 1. Corporation Name
PARK PLACE TRAVEL, INC.



Principal Place of Business 5545 PARK STREET NORTH ST. PETERSBURG FL 33709	Mailing Address 5545 PARK STREET NORTH ST. PETERSBURG FL 33709-6309
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/12/1986	3a. Date of Last Report 05/01/1996
21 Suite, Apt. #, etc.	22 City & State	26 Suite, Apt. #, etc.	27 City & State	4. FEI Number 59-2692836	Applied For Not Applicable
24 Zip	25 Country	29 Zip	30 Country	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent BRONSTEIN, KAY E. 5545 PARK STREET NORTH ST. PETERSBURG FL 33709				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	FL 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	<input type="checkbox"/> DELETE	1.1 TITLE VICE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BRONSTEIN, KAY E.		1.2 NAME	
STREET ADDRESS 5545 PARK STREET NORTH		1.3 STREET ADDRESS	
CITY-ST-ZIP ST. PETERSBURG FL		1.4 CITY-ST-ZIP	
TITLE VSD	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BRONSTEIN, JOEL D.		2.2 NAME	
STREET ADDRESS 5545 PARK STREET NORTH		2.3 STREET ADDRESS	
CITY-ST-ZIP ST. PETERSBURG FL		2.4 CITY-ST-ZIP	
TITLE PRESIDENT	<input type="checkbox"/> DELETE	3.1 TITLE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME NATHAN COPELAND	
STREET ADDRESS		3.3 STREET ADDRESS 5545 PARK ST N	
CITY-ST-ZIP		3.4 CITY-ST-ZIP ST PETERSBURG, FL 33709	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE VICE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME CHARLES POSSICK	
STREET ADDRESS		4.3 STREET ADDRESS 5545 PARK ST N	
CITY-ST-ZIP		4.4 CITY-ST-ZIP ST PETERSBURG FL 33709	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE VICE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME KAREN POSSICK	
STREET ADDRESS		5.3 STREET ADDRESS 5545 PARK ST N	
CITY-ST-ZIP		5.4 CITY-ST-ZIP ST PETERSBURG FL 33709	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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]*

CR2E034 (9/96)