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 # K11925

(0)

RAY'S TRAVEL SERVICE, INC.

FILED Feb 02 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 100 N.E. 3RD AVENUE 100 N.E. 3RD AVENUE									
STE. 110 STE. 110 FT. LAUDERDALE FL 33301 FT. LAUDERDALE					nı		DO NOT WRITE IN THIS SPACE		
					•		3. Date Incorporated or Qualified 01/14/1988	THO OF AGE	
2. Principal F	Place of Busi	ness	2a. Mailing A	ddress		· · · · · · · · · · · · · · · · · · ·	4. FEI Number		Applied For
21			26				65-0025850		Not Applicable
Sulte, Apt.	#, etc.		Suite, Apt. #, etc.				5 October of October Devices	\$8.7	5 Additional
22			27				5. Certificate of Status Desired	1 1 '	Required
City & Stat	le		City & State				6. Election Campaign Financing	\$5.0)0 May Be
23			28				Trust Fund Contribution		ed to Fees
Zip	<u> </u>				Countr	y	8. This corporation owes or has paid the current year Intangible		
24	25 29 29 3. Name and Address of Current Register				30		Personal Property Tax due June 30. Yes No		
AP			пі недівтегео Аде	nt	81	Name	10. Name and Address of New Re	Jistered Agent	
		SHALL A P.A.			Name				
		MERCIAL BLVD.				Street Ad	dress (P.O. Box Number is Not Acceptable)		
	'E. 720	ALF EL 00000							
FI	. LAUDERD	ALE FL 33308			83				
					84	City		FL 85 Zi	ip Code
11. Pursuant office or ragent. La	to the provis registered ag im familiar wi	lons of Sections 607.050 jent, or both, in the State ith, and accept the oblig	02 and 607.1508, F of Florida, Such c ations of, Section 6	torida Statuto hange was a 507.0505, Flo	es, the above uthorized be rida Statule	e-named co y the corpora s.	rporation submits this statement for the pration's board of directors. I hereby accep	urpose of changing t the appointment	g its registered as registered
SIGNATURE		or printed name of registered age					juired when reinstating)		
12.	Official states		D DIRECTORS	(IAC) (E	13.	ont signature req	ADDITIONS/CHANGES TO OFFICE	DATE	OPS IN 12
TITLE	P			DELETE	1.1 TITLE		ADDITIONO/OTANGES TO OTTO	☐ Change	
NAME	RAY, GI	regory M			1.2 NAME				
STREET ADDRESS	100 N.E	. 3RD AVE.			1.3 STREE	ADDRESS			
CITY-ST-ZIP	FT. LAU	IDERDALE FL 33301			1.4 CITY - 5				
TITLE	D			DELETE	2.1 TITLE			☐ Change	e Addition
NAME	RAY, MI	Lorian			2.2 NAME			_ •	_
STREET ADDRESS		. 3RD AVE.			2.3 STREET	ADDRESS			
CITY-ST-ZIP	FT. LAU	DERDALE FL 33301			2. 4 CITY-				
TITLE	VS			DELETE	3.1 TITLE			☐ Change	e Addition
NAME	ray, bf				3.2 NAME	j		•	
STREET ADDRESS		. 3RD AVE.			3.3 STREE	ADDRESS			
CITY-ST-ZIP		DERDALE FL 33301			3.4. CITY-	ST- Z IP			
TITLE	81	_		DELETE	4.1 TITLE		· · · · · · · · · · · · · · · · · · ·	☐ Change	e Addition
NAME	RAY, CL				4. 2 NAME]
STREET ADDRESS		. 3RD AVE.			4.3 STREET	ADDRESS			
CITY-ST-ZIP		DERDALE FL 33301			4.4 CITY - S	T-ZIP			
TITLE	8			DELETE	5.1 TITLE	Ī		☐ Change	e 🔲 Addition
NAME	RAY, GE				5.2 NAME				
STREET ADDRESS		. 3RD AVE.			53 STREET	ADDRESS			
CITY-ST-ZIP	FT. LAU	DERDALE FL 33301			5.4 CHTY-S	T- Z)P			
TITLE				DELETE	6.1 TITLE			☐ Change	e
NAME					6.2 NAME				•
STREET ADDRESS					6.3 STREET	ADDRESS			į
CITY-ST-7IP					6 A CITY - S	T_ 21P			

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 of 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 13 if changes, or on an alternment with an address