FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Jim Smith, Secretary of State
Division of Corporations

APPROVED AND FILED

95 MAY -1 PM 10:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K44831** **(1)**

1. Corporate Name
CARVEL TRAVEL, INC.

Principal Place of Business
9001 NW 5 RIVER DRIVE
MEDLEY FL 33166

Mailing Address
9001 NW 5 RIVER DRIVE
MEDLEY FL 33166

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **11/04/1988**
3a. Date of Last Report: **05/01/1994**
4. FEI Number: **65-0086700** — Applied For / Not Applicable
5. Certificate of Status Desired: [ ] **$8.75** Additional Fee Required
6. Certified Copy: [ ] **$5.00** May Be Added to Fees
8. Does corporation have liability or franchise tax under Ch. 220 F.S.? [✓] Yes [ ] No

21 / 22 / 23 / 24 / 25 / 26 / 27 / 28 / 29 / 30

9. Name and Address of Current Registered Agent
VELEZ, CARLOS
1636 SW 101ST AVE.
MIAMI FL 33165

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

11. [illegible]

12. [illegible]
PD
VELEZ, CARLOS
1636 SW 101ST AVE.
MIAMI FL

13. [illegible]

14. I hereby certify that the information appearing with the signature, if applicable, has not been changed since the last report filed with the Department of State, Division of Corporations, and that the information indicated on the annual report or supplemental annual report filed herewith 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 the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 1, or Block 10, if changed, or is attached with an address.

SIGNATURE: X [signature] X 4/29/95 X 305 8542451
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Area Code & Daytime Phone Number

0430177 FP