FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 **PROFIT** FLORIDA DEPARTMENT-OF STATE CORPORATION Sandra B. ANNUAL REPORT FILED 1997 DIVISION OF CORPORATIONS 97 NOV -3 PM 12: 34 DOCUMENT # SECRETARY OF STATE TALLAHASSEE, FLORIDA TOUR AND TRavel by D&M, INC Principal Place of Business Mailing Address 2801 Summerbrooke Casselberry, FL 32702 Same 3. Date Incorporated or Qualified 3a. Date of Last Report 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite. Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zip Country Zφ Country 8. This corporation has liability for intangible tax under s. 199,032. 24 25 29 Florida Statutes 30 Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name Brooks, Terry A. 2110 E. Robenson St. Orlando FL 30803 82 Street Address (P.O. Box Number is Not Acceptable) 83 R4 City 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 title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change Addition Demonitis, DINGF. NAME 1.2 NAME 2801 Summerbrocks Way STREET ADDRESS 1.3 STREET ADDRESS 200002340622-CITY-ST-ZIP -11/06/97--01095--014 ****165.00 \#\#\155^\ 14 C/TY-ST-ZIP DELETE TITLE 21 THLE DO MONTIS MARJONIE 2801 Symmerbrooke Way 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY - ST - 7/P TITLE DELETE 317116 Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-84-ZIP 3 4. CITY - ST - ZIP DELETE TITLE 411016 Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS City-St-ZiP 4.4 CITY - ST - ZIP TITLE DELETE 5.1 11111 Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADORESS City-St-Zip 5.4 CITY - S1 - ZIP TITLE ☐ DELETE 611111 Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STRUT ADDRESS sypplied with this filing doo, not pirt or supplemental about upp ition or the receiver of this year ged, or on an altachnight gith a I do hereby certify that the information si information indicated on this annual rep. ualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further ce-

opin is true and accurate and that my signature shall have the same legal effect as if made under oath; that empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name an address.

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t am an officer or director of the corpor appears in Block 12 or Block 13 if cha

SIGNATURE:

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.

AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

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| | ON OR BEFORE 9/17/97: \$550 (IF DISS | SOLVED, MINIMUM AMOUNT | DUE TO REINSTATE: \$750.) | ٦ | (4/) |
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| PROFIT COMPORATION ANNUAL REPORT | | Sandra | ARIMENT OF STATE B. Mortham tary of State | | |
| ٠ • | 1997 | DIVISION OF | CORPORATIONS | | · |
| DOCUN 1, Corporation | MENT # K5444(NAMO TRAVEL BY D & M, IN | | | | |
| Principal Place | of Business | Mailing Address | | | II ALBII DEBIL BABII BIBAL BIBIK BIBIK IBBI |
| 2001 SUMMERBROOKE WAY | | 2001 SUMMERBROOKE WAY | | | |
| CASSELBERRY FL 32707 | | CASSELBERRY FL 32707 | | DO NOT WRITE | |
| | | | | 3. Date Incorporated or Qualified | 3a. Date of Last Report |
| 2. Principal Pia | ace of Business | 2a. Mailing Address | | 01/01/1989 4. FEI Number | 01/26/1996 Applied For |
| 1 | | 26 | | 5972941952 | Not Applicable |
| Suite, Apt. (| #, etc. | Suite, Apt. #, etc. | | a. Geologicate of Status Desired | S8.75 Additional Fee Required |
| City & State |) | City & State | ~ | 6. Election Campaign Financing | \$5.00 May Be |
| 3 | | 28] | | Trust Fund Controllion | Added to Fees |
| Zip | Country | Zip | Country | A. This corporation dives or has pa Personal Property Tax due June | |
| 4 | 25 S. Name and Address of Curren | 29 nt Registered Agent | [30] | 10. Name and Address of New Re | |
| BROOKS, TERRY A. | | | | | |
| 2110 E. ROBINSON ST. 82 Type t Address (P. D. Box Number is Not Acceptable) | | | | | |
| UK | LANDO FL 32803 | | | | |
| | | | A O O CITY | } | 85 Zip Code |
| | | | | ノ | FL I''I ' |
| Pursuant t office or re agent. I ar | o the provisions of Sections 607.050 egistered agent, or both, in the State n familiar with, and accept the oblig | 12 and 607.1508, Florida Stal e of Florida. Such change wa jations of, Section 617.4505, | tutes, the above named corp is authorized by the corporat Florida Statutes | poration submits this statement for the p tion's board of directors. I hereby accep | ourpose of changing its registered of the appointment as registered |
| SIGNATURE | Signature, typod or printed name of registered ago | cut and title if afficientles | ATE Registered Agent signature requir | red when reinstating) | DATE |
| 12. | OFFICERS AN | | 13. | ADDITIONS/CHANGES TO OFFIC | |
| TITLE | DEMONTIS, DINO F. | DE L'INTERE | 1.1 TIDLE | | Change Addition |
| NAME STREET ADDRESS | 2801 SUMMERBROOKE WAY | $y \left(\frac{y}{2} \right) = 0 \frac{y}{2} $ | 1,3 STREET ADDRESS | | |
| CITY-ST-ZIP | CASSELBERRY FL | 1 4 | 1.4 CHY-ST-ZIP | | |
| TITLE | D DEMONITION AND LONG | □ DATE | 21 DILE | | Change Addition |
| NAME | DEMONTIS, MARJORIE 2801 SUMMERBROOKE WAY | · / / | 2.2 NAME | | |
| STREET ADDRESS CITY-ST-ZIP | CASSELBERRY FL | | 2.3 STREEL ADDRESS 2. 4 CITY-ST-ZIP | | |
| TITLE | | A) C Moenie | 3.1 TOLE | | ☐ Change ☐ Addition |
| VAME | | グィカン | 3.2 NAME | | |
| STREET ADDRESS | | / \\ | 3.3 STREET ADDRESS 3.4. CITY-S1-ZIP | | |
| CITY-ST-ZIP TITLE | V/ | () Dorum | 4.1 TITLE | | Change Addition |
| NAME | . \/ | 2 | 4. 2 NAME | | |
| STREET ADDRESS | (λ Y / \ | 1 | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | Z DELETE | 4.4 CHY-ST-ZIP 5.1 TITLE | | Change Addition |
| TITLE NAME | | | 5.2 NAME | | |
| STREET ADDRESS | | | 5 3 STREET ADDRESS | | |
| CITY-ST-ZIP | | D. DELETE | 5.4 CITY-ST-ZIP | | Change Addition |
| TITLE | • | ☐ DETELE | 6.1 TITLE 6.2 NAME | | C onsude C wholen |
| NAME STREET ADDRESS | | | 6.3 STREET ADDRESS | | |
| CITY_ST_7IP | | | 6.4 CITY - ST - ZIP | | |
| Informatio | n indicated on this annual report or a | supplemental annual report i | is true and accurate and that sowered to execute this remo | d in Section 119.07(3)(i), Florida Statule It my signature shall have the same lega rt as required by Chapter 607, Florida S | a eneci as il made ilbuer bain: ibar |
| appears in | n Block 12 or Block 13 if changed, o | or on an attachment with an a | address. | | |