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

**PROFIT** CORPORATION ANNUAL REPORT

1999 -



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # K70836

ABSOLUTELY TRAVEL, INC.

Principal	Place	of	Business

Mailing Address

## **FILED** Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90027 026 \*\*\*150.00



	52 HUNT CLUB BLVD 552 HUNT CLUB BLVD APOPKA FL 32703 APOPKA FL 32703		DO NOT WRITE IN THI	S SPAC	E						
						3. Date Incorporated or Qualifed 03/07/1989					
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number		App	lied For		
21		26				65-0103558	[	Not	Applicable		
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.					\$8.	75 A	dditional		
22		27	_		w .	5. Certificate of Status Desired	F	ee Rec	quired		
City & State City & State						6. Election Campaign Financing	\$5	.00	May Be		
23 28				Trust Fund Contribution		ded to					
Zip	Country	Zip	Zip Country			8. This corporation owes the current year le	ntangible				
— ·	25	`	¬ ¯ ¯			Personal Property Tax.					
24 25 29 30 30 9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent					
	o. Hame and Addition of California		8	31	Name						
WILL	IAMS, DAVID B.		L								
	HUNT CLUB BLVD.	•	8	32	Street Addres	fress (P.O. Box Number is Not Acceptable)					
	PKA FL 32703		-	3							
AFOI	FRA FL 32703		l°	3					1		
			8	34	City	F	L 85	Zip C	ode		
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	·					when reinstation) DATE					
	Signature, typed or printed name of registered agen			gent s	eignature required	ADDITIONS/CHANGES TO OFFICERS A	ND DID	ECTO	DC IAI 12		
12.	- OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFICERS A			Addition		
TITLE	DP	☐ DELETE	1.1 TITLE				υч	iai iyo	Abbiton		
NAME	WILLIAMS, ELIZABETH S.		1.2 NAM	E							
STREET ADDRESS	552 HUNT CLUB BLVD.		1.3 STRE	EET A	DDRESS				1		
CITY-ST-ZIP	APOPKA FL		1.4 CITY	-ST-Z	ZIP						
TITLE	VD	☐ DELETE	2.1 TITLE	E			Ch	ange	Addition		
NAME	WILLIAMS, DAVID B.		2.2 NAM	Ε							
STREET ADDRESS	552 HUNT CLUB BLVD.		2.3 STRE	EETA	DORESS						
CITY-ST-ZIP	APOPKA FL		.2.4 CITY	/- ST-	ZIP !	•					
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STREET ADDRESS											
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NAME			4. 2 NAM	Æ					İ		
STREET ADDRESS			4.3 STRE	EETA	DORESS						
CîTY-ST-ZîP			4.4 CITY	'-ST-2	ZIP						
TITLE		☐ DELETE	5.1 TITLE	E			Ci	nange	☐ Addition		
NAME			5.2 NAM	ΙE							
STREET ADDRESS			5.3 STR	EET A	DDRESS						
CITY-ST-ZIP			5.4 CITY	-ST-2	ŽIP						
TITLE		☐ DELETE	6.1 TITLE	E			□ c+	ange	Addition		
NAME		<del></del>	6.2 NAM	Ë					J		
\ \ \			6.3 STR	EETA	DDRESS				\		
STREET ADDRESS			64 CITY								

CITY-ST-ZIP

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 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, with all other like empowered.

3/3,199

(407)788-7777