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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K78480

(6)

ENTERPRISE TRAVEL, INC.

Principal Place of Business 980 NORTH FEDERAL HIGHWAY, SUITE 206

BOCA RATON FL 33432

Mailing Address

980 NORTH FEDERAL HIGHWAY, SUITE 206 BOCA RATON FL 33432

FILED Jan 28 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

ĺ						3. Date Incorporated or Qualified		\Box
						_04/07/1989		
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	Applied For	
21		26				65-0120122	Not Applicat	ble
Suite, Apt	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State)	City & State	ity & State			6. Election Campaign Financing	\$5.00 May Be	\Box
23		28				Trust Fund Contribution	Added to Fees	
Zip	Country	Zip Co				8. This corporation owes or has paid the curren	it year Intangible	
24				Personal Property Tax due June 30. Yes No				
9, Name and Address of Current Registered Agent						10. Name and Address of New Registered Age	ent	_
CULLEN, RICK S ESQ.				81 Name				
980			82	Street Ac	ddress (P.O. Box Number is Not Acceptable)		\dashv	
SUITE 206								
BOCA RATON FL 33432				83				
				84	City		85 Zip Code	
				104	City	FL. '	85 Zip Code	- 1
11. Pursuant t	o the provisions of Sections 607,050	2 and 607.1508, Florida Sta	atutes, the a	bove	e-named c	orporation submits this statement for the purpose of ch	nanging its registere	ed
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 age	ent and title if applicable.	NOTE: Registers	ad Ape	nt signature re	quired when rainstating) DATE		-
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFICERS AND D	IRECTORS IN 12	\neg
TITLE	PSD	DELETE					Change Additi	ion
NAME	CULLEN, LUISA F	· ·			ĺ		[- [
STREET ADDRESS	STREET ADDRESS 980 N. FEDERAL HIGHWAY., STE 206			1.3 STREET ADDRESS				- 1
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NAME				NAME		-	, onango	٠
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NAME			6.2 N]
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CITY-ST-ZIP		7.1 AL 7. Prot		ITY-S		Louis de carava de la carava de		
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 fusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in								

EFRICKISTE COURN PRES.