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

STREET ADDRESS

SIGNATURE:

Feb 17 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # K88885 (4) FERGIS TRAVEL SERVICE, INC. Principal Place of Business Mailing Address 6367 BIRD RD 6367 BIRD RD MIAMI FL 33155 MIAMI FL 33155 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/15/1989 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 21 65-0154293 Not Applicable Suite, Apt #, etc Suile, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes Yes 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name FERNANDEZ, LYDIA A. 6367 SW 40TH ST Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33155** 83 64 City 85 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 Horida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE (NOTE Ring stered Agent signature requ hon reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS DELFTE 1.1 TITLE Change Addition TITLE FERNANDEZ, LYDIA A. 12 NAME CR2E034 NAME 6367 SW 40TH ST 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME FERNANDEZ, SEGUNDO J. 2.2 NAME STREET ADDRESS 6367 SW 40TH ST 2.3 STREET ADDRESS **MIAMI FL** CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE FERNANDEZ, LYDIA G. NAME 32 NAME 6367 SW 40TH ST STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4. CITY - ST - ZIP TITLE DELETE 4 1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADORESS 4 4 CITY-ST-ZIP CITY-ST-ZIP Addition TELETE Change TATLE 5 1 TITLE 52 NAME NAME STREET ADDRESS **53 STREET ADDRESS** 5 4 CITY-ST-ZIP CITY - ST - ZIP DELETE 61 TITLE Addition TITLE 6.2 NAME NAME

6.3 STREET ADDRESS 6.4 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 supplied 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 trostee 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

LYDIA A. FERNANDEZ

PRESIDENT 2/7/98

669-4453

FILED