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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L23997 1. Corporation Name

| Principal Place of Business Mailing Address Part PREADY REY WEST FL 3000 Part Principal Place of Business 2a, Mailing Address 2b P. O. Box 2 46 1 September of Outsithed 10/18/1989 Applied For 10/18/1989 Applied For 10/18/1989 P. O. Box 2 46 1 September of Outsithed 10/18/1989 Applied For 10/18/ | OASIS T | RAVEL AGENCY INCORPOR | IATED | | | | |
|--|--|--|--|--|---|------------------------------------|--|
| ## PAULETTE SPECIME ROSS 24 HATON NAVEN DRIVE 13040 10/18/1939 3. Date Incorporated or Qualified 3. Date Incorporated | Principal Place | e of Business | Mailing Address | · | | BIBIL #1811 61611 #1811 61611 1441 | |
| 2. Principal Place of Business 2. A. Malling Address 2. | 811 PEACOCK PLAZA KEY WEST FL 33040 | | % PAULETTE SPERLING ROSSI 24 HILTON HAVEN DRIVE | | 3. Date Incorporated or Qualifed | | |
| Sulfe, Apt. #, etc. Sulfe, Ap | 2 Principal Pl | non of Business | 2a Mailing Address | ~~ | | Applied For | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 28 Suite, Apt. #, etc. 28 Suite, Apt. #, etc. 29 Suite, Apt. #, etc. 20 | ⊢ ' | , | | 161 | | <u> </u> | |
| City & State Country Zip Country State State Country State State State Country State State State State State State City & State State Country State St | Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | 7 - | |
| Zip Country Zip Country Zip Country Zip Country Zip | 22 | - | | | & Floation Composing Financing | | |
| Zip Country Zip 33 04 0 30 USA Paraonal Property Tax. ve ve no ve ve ve ve ve ve ve v | | 5 | L Kov Wort | FL. | 11 | | |
| 9. Name and Address of Current Registered Agent ROSSI-SPERLING, PAULETTE 24 HILTON HAVEN DRIVE KEY WEST FL 33040 11. Pursuant to this projection of Sections 607,0502 and 607,1508. Florida Statewas, the above-named corporation submits this statement for the purpose of changing its registered office on-registered agent. I am familiar with, after a post of the spot office on-registered agent. I am familiar with, after a post of the spot office on-registered agent. I am familiar with, after a post of the spot of the spot office on-registered agent. I am familiar with, after a post of the spot of the s | Zip | | <u> </u> | - TTO Š | | | |
| ROSSI-SPERLING, PAULETTE 24 HILTON HAVEN DRIVE KEY WEST FL 33040 83 84 City FL 85 Zip Code 81. Pursual enter the proxisions of Sections 607,0502 and 607,1508, Floring Stithwe, the above-named corporation submits this statement for the purpose of changing its registered of office do 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, and familiar with, and special the obbasticity is statement for the purpose of changing its registered agent. I am familiar with, and special the obbasticity is statement for the purpose of changing its registered agent. I am familiar with, and special the obbasticity is statement for the purpose of changing its registered agent. I am familiar with, and special the obbasticity is statement for the purpose of changing its registered agent. I am familiar with, and special the obbasticity is statement for the purpose of changing its registered agent. I am familiar with, and special the obbasticity is statement for the purpose of changing its registered agent. I am familiar with, and special the obbasticity is statement for the purpose of changing its registered agent. I am familiar with, and special the obbasticity is statement for the purpose of changing its registered agent. I am familiar with, and special the obbasticity is statement for the purpose of changing its registered agent. I am familiar with, and special the obbasticity is statement for the purpose of changing its registered agent. I am familiar with, and special the obbasticity is statement for the purpose of changing its registered agent. I am familiar with, and suppose agent. I am familiar wit | 24] | | 23 30 | <u>, </u> | | | |
| 24 HILTON HAVEN DRIVE KEY WEST FL 33040 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 11. Pursuaertor tittr previsions of Sections 607 0502 and 607 1508, Floridg States, the above-named corporation submits this statement for the propose of changing its registered office change is registered agent, or both if in the state of Floridg Apich Technique was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, am familiar with, and beautiful the obligation of 0500s, Floridg Status, pool of predictions of the obligation of 0500s, Floridg Status, pool of directors. I hereby accept the appointment as registered agent, am familiar with a fa | | | | | | | |
| KEY WEST FL 33040 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 agent, or both if the state of Florida, Such thanking was authorized by the corporation's board of directors. I hereby accept the suppointment as registered agent, and passed the obligation 607 0509. The composition is board of directors. I hereby accept the purpose of changing its registered agent and manufacture of the purpose of changing its registered agent agent and the purpose of primed raine of registered agent approximation in the purpose of primed raine of registered agent approximation in the purpose of primed raine of registered agent approximation in the purpose of primed raine of registered agent approximation in the purpose of changing its registered agent approximation in the purpose of primed raine of registered agent approximation in the purpose of changing its registered agent approximation in the purpose of changing its registered agent approximation in the purpose of changing its registered agent approximation in the purpose of changing its registered agent approximation in the purpose of changing its registered agent approximation in the purpose of changing its registered agent approximation in the purpose of changing its registered agent approximation in the purpose of changing its registered agent approximation in the purpose of purpose accept and purpose accept agent approximation in the purpose of primed raine registered agent approximation in the purpose of changing its registered agent approximation in the purpose of purpose accept agent approximation in the purpose of changing agent approximation in the purpose of changing agent approximation in the purpose of changing agent approximation agent approximation app | 1 | • | | 82 Street Add | 82 Street Address (P.O. Box Number is Not Acceptable) | | |
| SICHATURE | _ | | | 83 | | | |
| 11. Pursuent-to the prograisions of Sections 607 (500) and 607 (500). Floridg States, the above-named corporation submits this statement for the purpose of changing its registered office on registered depent, or both in the state of Florids. Pacific thange-was authorized by the corporation's board of directors, I hereby accept the appointment as registered signed. I was formed than of the state of specials and the state of specials are specials. I was applicable to the state of specials and the state of specials are specials. I was applicable to the state of specials. I was applicable to the specials are specials. I was applicable to the special special specials are specials. I was applicable to the sp | '\-' | 11201 12 00010 | | 6,5 | | | |
| SIGNATURE Signature, Typed or printed name of registatored appart and that it applicables OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PROSSI-SPERLING, PAULETTE 24 HILTON HAVEN DRIVE (TIY-ST-ZP) TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRE | • • | | | 1 1 | · F | | |
| TITLE PROSSI-SPERLING, PAULETTE 12 NAME 12 NAME 13 STREET ADDRESS 24 HILTON HAVEN DRIVE 13 STREET ADDRESS 14 CTY-ST-ZP 17 NAME 15 NAME | SIGNATURE | Signature, typed or printed name of registered agent | it and tritle if applicable. (NOTE: Re | gistered Agent signature require | ad when reinstating) DATE | | |
| NAME ROSSI-SPERLING, PAULETTE 12 12 13 17 12 14 17 17 17 17 17 17 17 | | | | | ADDITIONS/CHANGES TO OFFICERS | | |
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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 of kustee 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 or an affectment with an address with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

FILED May 01, 1999 8:00 am Secretary of State

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