## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Apr 06, 2001 8:00 am Secretary of State **DOCUMENT # L44370** 1. Entity Name FUGAZY INTERNATIONAL TRAVEL, INC. 04-06-2001 90010 043 \*\*\*150.00 Principal Place of Business Mailing Address 6006 SW 18TH STREET 6006 SW 18TH STREET **BOCA RATON FL 33433 BOCA RATON FL 33433** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0620329 Not Applicable Zip Country Zin Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BOICE, YVONNE S Street Address (P.O. Box Number is Not Acceptable) 6006 SW 18TH STREET STE B6 **BOCA RATON FL 33433** Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE Delete TITI F Change Addition BOICE, YVONNE S NAME STREET ADDRESS 6006 SW 18TH STREET., #86 STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33433** CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition STEWART, IRIS NAME NAME STREET ADDRESS 6006 SW 18TH STREET., #86 STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33433** CITY-ST-ZIP TITLE Delete Change TITLE ☐ Addition NAME LEVITT, DREW M ESQ NAME STREET ADDRESS 1301 W. NEWPORT CTR. DR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **DEERFIELD BEACH FL 33442** TITI F ☐ Delete TITLE Change Addition NAME BOICE, LAUREN A NAME STREET ADDRESS 6006 SW 18TH STREET., #B6 STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33433** CITY-ST-ZIP TITLE □ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 report or supplemental 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 11 or Block 12 if

SIGNATURE: 561-447-7555 YVSTATURE SND TYBED THE BINTED PANE OF SIGNEY OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered.