

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 24, 2003 8:00 am
Secretary of State

02-24-2003 90214 040 ***150.00

DOCUMENT # L44370

1. Entity Name
FUGAZY INTERNATIONAL TRAVEL, INC.



Principal Place of Business
**6006 SW 18TH STREET
BOCA RATON FL 33433**

Mailing Address
**6006 SW 18TH STREET
BOCA RATON FL 33433**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
6018 SW 18th Street

3. Mailing Address
6018 SW 18th Street

Suite, Apt. #, etc.
Suite C-7

Suite, Apt. #, etc.
Suite C-7

City & State
Boca Raton FL

City & State
Boca Raton FL

Zip Country
33433 USA

Zip Country
33433 USA

4. FEI Number **65-0620329**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BOICE, YVONNE S
6006 SW 18TH STREET
STE B6
BOCA RATON FL 33433**

Name

Street Address (P.O. Box Number is Not Acceptable)
6018 SW 18th Street

Suite C-7

City
Boca Raton

FL

Zip Code
33433

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Yvonne S. Boice*
Signature, typed or printed name of registered agent and title if applicable.

2/19/03
DATE

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **BOICE, YVONNE S**
STREET ADDRESS **6006 SW 18TH STREET., #B6**
CITY-ST-ZIP **BOCA RATON FL 33433**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **6018 SW 18th Street-Suite C-7**
CITY-ST-ZIP **Boca Raton, FL 33433**

TITLE **V** ☐ Delete
NAME **STEWART, IRIS**
STREET ADDRESS **6006 SW 18TH STREET., #B6**
CITY-ST-ZIP **BOCA RATON FL 33433**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **6018 SW 18th Street-Suite C-7**
CITY-ST-ZIP **Boca Raton, FL 33433**

TITLE **TD** ☐ Delete
NAME **LEVITT, DREW M ESQ**
STREET ADDRESS **1301 W. NEWPORT CTR. DR.**
CITY-ST-ZIP **DEERFIELD BEACH FL 33442**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **855 South Federal Highway-Suite 12**
CITY-ST-ZIP **Boca Raton, FL 33432**

TITLE **S** ☐ Delete
NAME **BOICE, LAUREN A**
STREET ADDRESS **6006 SW 18TH STREET., #B6**
CITY-ST-ZIP **BOCA RATON FL 33433**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **6018 SW 18th Street-Suite C-7**
CITY-ST-ZIP **Boca Raton, FL 33433**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Yvonne S. Boice*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Yvonne S. Boice

2/19/03

(561) 338-8443

Date

Daytime Phone #

CR2E034 (10/02)