

# FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **L86241** (1)

1. Corporation Name

**INTY TRAVEL, INC.**



Principal Place of Business

**5920 JOHNSON ST.  
SUITE 103  
HOLLYWOOD FL 33021**

Mailing Address

**5920 JOHNSON ST.  
SUITE 103  
HOLLYWOOD FL 33021**

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**ORTIZ, SILVANA  
7021 COOLIDGE STREET  
HOLLYWOOD FL 33024**

3. Date Incorporated or Qualified

**07/05/1990**

3a. Date of Last Report

**04/18/1995**

4. FEI Number

**65-0203906**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution

☐

**\$5.00 May Be  
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes

☒ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

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 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 type for principal of registered agent and the applicable

(Name) Registered Agent Signature required when revolving

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**PSD  
ORTIZ, SILVANA  
7021 COOLIDGE ST.  
HOLLYWOOD FL 33024**

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**VTD  
ORTIZ, RICARDO  
7021 COOLIDGE ST.  
HOLLYWOOD FL 33024**

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 or trustee 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 only in Block 13 if changed with an address.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/96 (934) 787-8160

CR2E034 (12/95)