

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # L99829 (8)

1. Corporation Name

MIAMI WELCOME CENTER, INC.



Principal Place of Business

800 N. FERNCREEK AVE.
ORLANDO FL 32803

Mailing Address

800 N. FERNCREEK AVE.
ORLANDO FL 32803

3. Date Incorporated or Qualified
09/12/1990

3a. Date of Last Report
05/01/1995

4. FEI Number
59-3039591

Applied For
Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

9. Name and Address of Current Registered Agent

PIERCE, JOHN G.
800 N. FERNCREEK AVE.
ORLANDO FL 32803

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/26/96

12.

OFFICERS AND DIRECTORS

DELETED

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
HOISINGTON, ROBERT
6 LAGOON RD.
HILTON HEAD SC

DELETED

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DELETED

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DELETED

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STREET ADDRESS
CITY - ST - ZIP

DELETED

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DELETED

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13.

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/26/96

0057781

CP

CR2E034 (12/95)