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

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS M36215 (5)DOCUMENT # D'MARGO TRAVEL, INC. Principal Place of Business Maling Address 13230 S.W. BTH STREET 13230 S.W. 8TH STREET MIAMI FL 33184 MIAMI FL 33184 3. Date Incorporated or Qualified 3a. Date of Last Report 05/01/1995 08/04/1986 4, FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 59-2702942 Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 28 8. This corporation has liability for intangible tax under s 199.032, Country Zip ☐ Yes ☐ No Florida Statutes 30 25 29 24 10. Name and Address of New Registered Agent 9 Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) ARMENTERIOS. THANIA 82 410 S.W. 132 AVE. **MIAMI FL 33184** 84 85 Zip Code City 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) CR2E034 (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE 1. 1 TITLE ☐ Change ☐ Addition TITLE ARMENTEROS, THANIA 12 NAME NAME 410 S.W. 132 AVE. 1.3 STREET ADDRESS STREET ADDRESS MIAM! FL 1.4 CITY - ST - ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE TITLE 2 1 TITLE ARMENTEROS, MARGARITA 2.2 NAME NAME 410 S.W. 132 AVE. 2 3 STREET ADDRESS STREET ADDRESS MIAMI FL 24 CITY-ST-ZIP CITY - ST- ZIP ☐ Addition ☐ Change T DELETE TITLE 3 1 TITLE ARMENTEROS, DAISY 32 NAME NAME 410 S.W. 132 AVE. 3.3 STREET ADDRESS STREET ADDRESS MIAMI FL 3.4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 4. 1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STHEET ADDRESS 4.4 CITY - ST - ZIP CHTY-ST-ZIP Change Addition DELETE 5.1 TITLE THILE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP CITY - ST - ZIP DELETE 6 1 TITLE ☐ Change Addition TITLE 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6 4 City - ST - ZIP DITY-ST-ZIP 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)(x). 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 on an attachment with an address

APRIL 22, 1996