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Apr 10 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # M93270

(0)

1. Corporation Name

PROMOTIONAL TRAVEL, INC.



Principal Place of Business

501 N. WYMORE RD.
WINTER PARK FL 32789
US

Mailing Address

501 N. WYMORE RD.
WINTER PARK FL 32789-2863
US

3. Date Incorporated or Qualified

08/04/1988

3a. Date of Last Report

08/21/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

Zip

30

Country

4. FEI Number

59-2904987

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

9. Name and Address of Current Registered Agent

KOSMAS, R. PAUL
751 THIRD AVE.
NEW SMYRNA BEACH FL 32789

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

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
KOSMAS, R. PAUL
STREET ADDRESS
751 THIRD AVE.
CITY-ST-ZIP
NEW SMYRNA BCH. FL

TITLE ☐ DELETE

NAME
KOSMAS, NICHOLAS G.
STREET ADDRESS
751 THIRD AVE.
CITY-ST-ZIP
NEW SMYRNA BCH. FL

TITLE ☐ DELETE

NAME
KOSMAS, STEVEN P.
STREET ADDRESS
751 THIRD AVE.
CITY-ST-ZIP
NEW SMYRNA BCH. FL

TITLE ☒ DELETE

NAME
BIZAR, BRANDON S.
STREET ADDRESS
501 N. WYMORE RD.
CITY-ST-ZIP
WINTER PARK FL 32789

TITLE ☒ DELETE

NAME
KOSMAS, MICHAEL N.
STREET ADDRESS
PO BOX 2155 (N/A)*
CITY-ST-ZIP
NEW SMYRNA BEACH FL 32170

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☒ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 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 or Block 14, or on an attachment with an address.

SIGNATURE:

Michael L. O'Brien
SIGNATURE OF REGISTERED AGENT

4/7/97

407-975-5000

Daytime Phone #

0074099

CP2E034 (9/96)