

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90203 001 ****61.25

DOCUMENT # N20451

1. Corporation Name

S.A.T.A. - SOUTH & CENTRAL AMERICAN TRAVEL ASSOC
IATION, INC.

Principal Place of Business

13171 SW 20TH STREET
MIAMI FL 33175

Mailing Address

13171 SW 20TH STREET
MIAMI FL 33175



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

3. Date Incorporated or Qualified

05/04/1987

4. FEI Number

65-0016302

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

9. Name and Address of Current Registered Agent

BRODIE, SIDNEY Z ESQ
7270 NW 12TH STREET, PH-1
MIAMI FL 33126

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 617.0502 and 617.1508, 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 617.0503, 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 VPD
NAME TARAMONA, HERMINE
STREET ADDRESS 13171 SW 20TH STREET
CITY-ST-ZIP MIAMI FL ☐ DELETE

TITLE CD
NAME LAURITO, MARISA
STREET ADDRESS 13171 SW 20TH STREET
CITY-ST-ZIP MIAMI FL ☒ DELETE

TITLE PD
NAME OBRADOVICH, JORGE
STREET ADDRESS 13171 SW 20TH STREET
CITY-ST-ZIP MIAMI FL ☐ DELETE

TITLE TD
NAME CORREA, CIRO
STREET ADDRESS 13171 SW 20TH STREET
CITY-ST-ZIP MIAMI FL ☐ DELETE

TITLE SD
NAME OBREGOSO, MONICA
STREET ADDRESS 13171 SW 20TH STREET
CITY-ST-ZIP MIAMI FL ☐ DELETE

TITLE SD
NAME TAMARGO, FLOR
STREET ADDRESS 13171 SW 20TH ST
CITY-ST-ZIP MIAMI FL 33175 ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT ☒ Change ☐ Addition
1.2 NAME TARAMONA, HERMINE
1.3 STREET ADDRESS 13171 SW 20 STREET
1.4 CITY-ST-ZIP MIAMI, FL 33175

2.1 TITLE CHAIRMAN ☐ Change ☐ Addition
2.2 NAME OBRADOVICH, JORGE
2.3 STREET ADDRESS 13171 SW 20 STREET
2.4 CITY-ST-ZIP MIAMI, FL 33175

3.1 TITLE VICE PRESIDENT ☐ Change ☐ Addition
3.2 NAME BERK, ANNIE
3.3 STREET ADDRESS 13171 SW 20 STREET
3.4 CITY-ST-ZIP MIAMI, FL 33175

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME SAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME SAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME SAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/30/99 305 670-1961
/Date Daytime Phone #

CR2E037 (11/98)