

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 24, 2002 8:00 am**  
**Secretary of State**

02-24-2002 90060 041 \*\*\*\*66.25

**DOCUMENT # N46090**

1. Entity Name

**TICKETS TO PARADISE, INC.**

Principal Place of Business

Mailing Address

% LEISURE MANAGEMENT MIAMI, INC.  
 721 NW 1ST AVE.  
 MIAMI FL 33136

701 ARENA BLVD  
 MIAMI FL 33136-4102

2. Principal Place of Business

3. Mailing Address

9900 SW 143rd St

9900 SW 143rd St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami

City & State

Miami FL

4. FEI Number

65-0311686

Applied For

Not Applicable

Zip

33176

Country

Miami-Dade

Zip

33176

Country

Miami-Dade

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DOYLE, NANCY G  
 701 ARENA BOULEVARD  
 MIAMI FL 33176-6102

Name

Richard B Friend  
 9900 SW 143rd St

City

Miami

FL

Zip Code

33176

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2/12/02

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

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

**Make Check Payable to  
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE CD ☐ Delete  
 NAME FRANKLIN, ROBERT A.  
 STREET ADDRESS % 721 NW 1ST AVE.  
 CITY-ST-ZIP MIAMI FL

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE TD ☐ Delete  
 NAME BECKFORD, DAVID  
 STREET ADDRESS 701 ARENA BOULEVARD  
 CITY-ST-ZIP MIAMI FL 33136

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE VPD ☐ Delete  
 NAME SEGUI, BEATRICE  
 STREET ADDRESS 701 ARENA BOULEVARD  
 CITY-ST-ZIP MIAMI FL 33136

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE P ☒ Delete  
 NAME NANCY G. DOYLE  
 STREET ADDRESS 701 ARENA BLVD.  
 CITY-ST-ZIP MIAMI FL

TITLE PD ☐ Change ☒ Addition  
 NAME Richard B Friend  
 STREET ADDRESS 9900 SW 143rd St  
 CITY-ST-ZIP Miami FL 33176

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. 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 report or supplemental reports 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 10 or Block 11 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

Date

Daytime Phone #

2/12/02 305-971-4008

CR2E037 (9/01)