FILED **2002 UNIFORM BUSINESS REPORT (UBR)** Sep 11, 2002 8:00 am Secretary of State P00000042435 DOCUMENT # 1. Entity Name 09-11-2002 90121 031 ***150 00 EXPRESS TOUR & TRAVEL, INC. Principal Place of Business Mailing Address DOTOLYAN 7021 GRAND NATIONAL DR #110 7021 GRAND NATIONAL DR #110 ORLANDO FL 32819 ORLANDO FL 32819 2. Principal Place of Business 3. Mailing Address buorpisor 1021 grand National Da MadiaNor Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 110 110 City & State Applied For City & State 4. FEI Number 59-3646187 Not Applicable and oriondo ORANGE \$8.75 Additional 5. Certificate of Status Desired 2 ORM NCE Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ABDUL, SALEH Street Address (P.O. Box Number is Not Acceptable) 7021 GRAND NATIONAL DR #110 ORLANDO FL 32819 City Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 D TITLE TITLE ☐ Change ☐ Addition ☐ Delete ABDUL, SALEH M NAME NAME 7021 GRAND NATIONAL DR #110 STREET ADDRESS STREET ADDRESS ORLANDO FL 32819 CITY-ST-7IP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Change □ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filling 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 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 11 or Block 12 if changed, or on an attachment with other like empowered

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

☐ Delete

☐ Delete

Daytime Phone #

Change

Change

☐ Addition

Addition

EXPRESS TOUR & TRAVEL INC.

7021 GRAND NATIONAL DR. SUIT 110 ORLANDO, FL 32819

P000000 423T

FLORIDA DEPARTMENT OF THE STATE

REF: P00000012435

OUR Company Never Recived a
Renewal Notice from the state
Causing us not to respond to the
Renwal on time

Fres wate the Adelitional

B-st Regards Schok Abdul 9/10/02

TEL: 407.352 0055 FAX: 407.352 0713 EMAIL: SAL@EXPTRAVEL.COM