

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 12, 2002 8:00 am
Secretary of State

09-12-2002 90096 041 ***163.75

DOCUMENT # 901000078286

1. Entity Name

COTAWAY VACATIONS TRAVEL

2. Principal Place of Business

3650 N. STATE RD 7.

Suite, Apt. #, etc.

3. Mailing Address

3650 N. STATE RD 7.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
LAUDERDALE LAKES FLORIDA

City & State
LAUDERDALE LAKES FL

4. FEI Number
6511 30387

Applied For
Not Applicable

Zip
33319

Country
USA

Zip
33319

Country
USA

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name
CALVIN KERR

Street Address (P.O. Box Number is Not Acceptable)
3650 N. STATE RD 7

City
LAUDERDALE LAKES FL

Zip Code
33319

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

Calvin Kerr CALVIN KERR

9/2/02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☒

10. Election Campaign Financing
Trust Fund Contribution.

☒

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
CALVIN KERR
1460 AVON LANE #932
N. LAUD FL 33068

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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NAME
STREET ADDRESS
CITY - ST - ZIP

13. 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 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 on an attachment with an address, with all other like empowered.

Calvin Kerr CALVIN KERR

9/2/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

Attachments 871760
P01000078286

Florida Department of State Division of Corporations

Public Inquiry

Florida Profit

GETAWAY VACATIONS TRAVEL, INC.

PRINCIPAL ADDRESS

3650 NORTH STATE ROAD 7
LAUDERDALE LAKES F, 33319

MAILING ADDRESS

3650 NORTH STATE ROAD 7
LAUDERDALE LAKES F, 33319Document Number
P01000078286FEI Number
NONEDate Filed
08/09/2001State
FLStatus
ACTIVEEffective Date
NONE

Registered Agent

Name & Address
SPIEGEL & UTRERA, P.A. 1840 SOUTHWEST 22ND AVENUE 4TH FLOOR MIAMI FL 33145

Officer/Director Detail

Name & Address	Title
KERR, CALVIN A 3650 NORTH STATE ROAD 7 LAUDERDALE LAKES F, 33319	PSTD

Annual Reports

Report Year	Filed Date	Intangible Tax
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GETAWAY VACATIONS TRAVEL

Attachments 871760
#P0100007828

Uniform Business Report
Division of Corporations
P.o. Box 1500
Tallahassee, Fl 32302

September 5, 2002

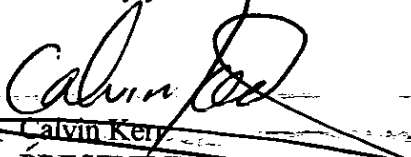
By checking our records we have indicated that we have not received
the PROFIT CORP UNIFORM BUSINESS REPORT.
We are hereby sending a reprinted copy from the computer as advised
by on of your agent. Please accept the application on this very
short notice.

We have carefully read over all the required information which is sign and
enclosed is the check payable to the state.

If you should have any questions please do not hesitate to contact us immediately.

Thanks for your ind cooperation and best regards as we forward for future
business and success.

Sincerely yours


Calvin Kery
PRESIDENT