

**2004 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000095092



FILED

MAY 17 AM 10:52

1. Entity Name
FANCY LAKES TRAVEL & MORE, INC

DO NOT WRITE IN THIS SPACE

REINSTATEMENT 03-04
3-18-04 90057 002 150.00
3-18-04 90057 001 150.00
DO NOT WRITE IN THIS SPACE
TR

2. Principal Place of Business
5665 NW 195 DRIVE
Suite Apt. # etc

3. Mailing Address
5665 NW 195 DRIVE
Suite Apt. # etc

City & State
MIAMI, FL

City & State
MIAMI, FL

4. FEI Number
27-0028154

Applied For
 No: Applicable

Zip
33055

Country
DADE

Zip
33055

Country
DADE

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

7. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

Name
SONIA REY
P.O. Box Number is Not Acceptable
18500 NW 62ND AVENUE #405

City
HIALEAH FL Zip Code
33015

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 *Sonia Rey*

DATE
03/05/2004

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

NAME	P
NAME	REY, SONIA
STREET ADDRESS	18500 NW 62ND AVENUE, #405
CITY-STATE-ZIP	HIALEAH, FL 33015

NAME	D
NAME	PEREZ, CLAUDIA
STREET ADDRESS	3800 S. OCEAN DRIVE, SUITE216
CITY-STATE-ZIP	HOLLYWOOD, FL 33019

NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or on an attachment with an address with all other employees.

SIGNATURE: *Sonia Rey*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE: **03/05/04** (305) 622-9880

UNIFORM BUSINESS REPORT