

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morfitt
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 11:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

P08909

CANADIAN HOLIDAYS (USA), INC.

Principal Place of Business

Mailing Address

2800, 700 - 2nd Street S.W.
Calgary, Alberta T2P 2W2
CANADA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/31/1986

3a. Date of Last Report
22/04/94

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
592626162

Applied For
Not Applicable

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

22. City & State

27. City & State

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

23. Zip

Country

28. Zip

Country

7. This corporation has liability for intangible tax under S. 199.032
Florida Statutes ☒ Yes ☐ No

24. Zip

25. Country

29. Zip

30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

UNITED STATES CORPORATION COMPANY
110 North Magnolia Street
Tallahassee, Florida 32301

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

(Signature) (Type or printed name of registered agent and title of applicant)

(Signature) (Type or printed name of registered agent and title of applicant)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PRESIDENT
NAME	ERROL FRANCIS
STREET ADDRESS	4221 Marble Thorne Court
CITY, ST, ZIP	Mississauga, Ontario L4W 2H9
TITLE	VICE PRESIDENT, OPERATIONS
NAME	CARL DICKINSON
STREET ADDRESS	35 Van Every
CITY, ST, ZIP	Kirkland, Quebec H9J 2S2
TITLE	VICE PRESIDENT FINANCE & CORP. SEC.
NAME	DENNIS LEPHOLTZ
STREET ADDRESS	1364 Pear Tree Circle
CITY, ST, ZIP	Oakville, Ontario L6M 2J2
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

1. TITLE	Change	Addition
2. NAME	600001500980	
3. STREET ADDRESS	-05/30/95--01023--004	
4. CITY, ST, ZIP	****208.75 ****208.75	
5. TITLE	Change	Addition
6. NAME		
7. STREET ADDRESS		
8. CITY, ST, ZIP		
9. TITLE	Change	Addition
10. NAME	600001500980	
11. STREET ADDRESS	-05/30/95--01023--005	
12. CITY, ST, ZIP	****16.25 ****16.25	
13. TITLE	Change	Addition
14. NAME		
15. STREET ADDRESS		
16. CITY, ST, ZIP		
17. TITLE	Change	Addition
18. NAME		
19. STREET ADDRESS		
20. CITY, ST, ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 19.07(3)(b), 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: DENNIS E. LEPHOLTZ

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 30, 1995

(416) 620-8083

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Secretary of State
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Suite, Apt. #, etc.

Suite, Apt. #, etc.

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City & State

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Florida Statutes ☒ Yes ☐ No

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SIGNATURE

Signature (Typed or printed name of registered agent and title if applicable)

(Not for Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PRESIDENT
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STREET ADDRESS	4221 Marble Thorne Court
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TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 007, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: DENNIS E. LEPHOLTZ

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 11 30, 1995

(416) 620-8083

(Update 1/9/94)

Canadian

May 11, 1995

JAYNE S. LEWIS
DIRECT LINE: (403) 294-4419

SECRETARY OF STATE
Annual Reports Section
Division of Corporations
P.O. Box 6327
TALLAHASSEE, Florida
U.S.A. 32314

Dear Sirs:

Re: Canadian Holidays (USA), Inc.
- Registration in Florida

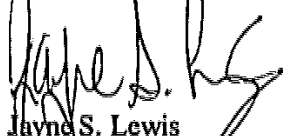
Please find enclosed the 1995 Annual Report, in duplicate, together with our cheques totalling the amount of US \$225.00 in payment of your filing fees.

Kindly arrange for registration of the enclosed Report and return the duplicate registered copy to my attention, together with the Certificate of Status. **Please ensure that the Certificate of Status is forwarded to the mailing address as in past years we have continuously paid the \$8.75 but have not received the Certificate of Status in return.**

Thank you for your assistance with this matter.

Yours very truly,

CANADIAN AIRLINES INTERNATIONAL LTD.


Jayne S. Lewis
Legal Secretary

/jsl
Encl.
g:/jayne/letter/florida.txt