FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 AM 11:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P41129** **(8)**

1. Corporation Name
APEX WORLD TRAVEL, INC.

Principal Place of Business	Mailing Address
9001 WEST SAMPLE ROAD CORAL SPRINGS FL 33065-4101	9001 WEST SAMPLE ROAD CORAL SPRINGS FL 33065-4101

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/22/1992
3a. Date of Last Report: 03/21/1994

2. Principal Place of Business	2a. Mailing Address
21 4620 W. Commercial Blvd	26 4620 W. Commercial Blvd
22 Suite, Apt. #, etc. STE 3	27 Suite, Apt. #, etc. STE 3
23 City & State TAMARAC, Florida	28 City & State TAMARAC, Florida
24 Zip 33319 25 Country Broward	29 Zip 33319 30 Country Broward

4. FEI Number: 11-2911156 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
STERN, THEODORE 9310 WEST SAMPLE ROAD CORAL SPRINGS FL 33065-4101	81 Name: THEODORE STERN 82 Street Address (P.O. Box Number is Not Acceptable): 4620 W. Commercial Blvd STE 3 83 84 City: TAMARAC FL 85 Zip Code: 33319

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when mailing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PCD	11 TITLE	☐ Change ☐ Addition
NAME	DARWISH, MAURICE	12 NAME	
STREET ADDRESS	200 EAST 84TH STREET	13 STREET ADDRESS	
CITY ST ZIP	NEW YORK NY	14 CITY ST ZIP	
TITLE	VCD	21 TITLE	VCD ☒ Change ☐ Addition
NAME	STERN, THEODORE	22 NAME	THEODORE STERN
STREET ADDRESS	11263 W. ATLANTIC, #104	23 STREET ADDRESS	11755 S.W. 1ST ST
CITY ST ZIP	CORAL SPRINGS FL	24 CITY ST ZIP	CORAL SPRINGS FL 33071
TITLE	T	31 TITLE	☒ Change ☐ Addition
NAME	STERN, THEODORE	32 NAME	THEODORE STERN
STREET ADDRESS	11263 W. ATLANTIC, #104	33 STREET ADDRESS	11755 SW. 1ST ST
CITY ST ZIP	CORAL SPRINGS FL	34 CITY ST ZIP	CORAL SPRINGS FL 33071
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 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)(i), 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: _____ 4/4/95 305 733 4444
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

010848 CP