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Jul 08, 2002 8:00 am
Secretary of State
06-16-2002 90707 042 ***150.00

6/16/2002-90707-042

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P92000011641

1. Entity Name: Safari Tours, Inc.

DO NOT WRITE IN THIS SPACE

[redacted]

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2. Principal Place of Business: 148 Sunny Isles Blvd	3. Mailing Address: 148 Sunny Isles Blvd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: North Miami Beach, FL	City & State: North Miami Beach
Zip: 33160 Country:	Zip: 33160 Country:

4. FEI Number: 65-0374098 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name: Luis G. Berto
Street Address (P.O. Box Number is Not Acceptable): 407 Lincoln rd #500
City: Miami Beach FL Zip Code: 33139

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 ______________________
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) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE	DP	TITLE	
NAME	Sandro Mastella	NAME	
STREET ADDRESS	1760 NE 197 Terrace	STREET ADDRESS	
CITY-ST-ZIP	NMB 33179	CITY-ST-ZIP	
TITLE	DV	TITLE	
NAME	Gabriel Toberman	NAME	
STREET ADDRESS	440 Espanola way	STREET ADDRESS	
CITY-ST-ZIP	M. Beach FL 33139	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
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STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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CR2E034B (12/01)

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

SIGNATURE: [signature] SANDRO MASTELLA (305) 956-9922
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

P92000011641

attachment

96791

Safari Tours, Inc.
148 Sunny Isles Blvd
North Miami Beach, Fl 33160

Uniform Business Report
Division of Corporations
PO Box 1500
Tallahassee, Fl 32302-1500

July 2, 2002

Dear Sir/Madam,

Enclosed please find a copy of my Uniform Business Report for this year.

I mail in my fee on a timely basis before May 1, 2002, but I did not include my report. You mailed me a letter asking me for my report, I prepared a handwritten report and mailed it in with your letter. To my surprise you are now charging me an additional $400.00.

This is not fair since my fee was in your possession before May 1, 2002. Please adjust and abate these penalties.

If you have any further questions, please feel free in contacting me at my office.

Sincerely,

Luis G. Brito