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 5:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P92000013900 (5)**

1. Corporation Name
TOURS BY CHARLIE, INC.

Principal Place of Business	Mailing Address
2750 N 29TH AVE SUITE 209 HOLLYWOOD FL	2750 N 29TH AVE SUITE 124 HOLLYWOOD FL US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	3a. Date of Last Report
12/23/1992	08/25/1994

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

4. FEI Number
65-0376103
☐ 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
BLUTSTEIN, GEORGE J 20801 BISCAYNE BLVD #303 AVENTURA FL 33180	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

12. OFFICERS AND/OR DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND/OR DIRECTORS
01 Title 02 Name 03 Street Address 04 City, St, Zip	D SPIERER, CHARLIE 2750 N 29TH AVE SUITE 209 HOLLYWOOD FL	☐ Change ☐ Addition
05 Title 06 Name 07 Street Address 08 City, St, Zip		☐ Change ☐ Addition
09 Title 10 Name 11 Street Address 12 City, St, Zip		☐ Change ☐ Addition
13 Title 14 Name 15 Street Address 16 City, St, Zip		☐ Change ☐ Addition
17 Title 18 Name 19 Street Address 20 City, St, Zip		☐ Change ☐ Addition
21 Title 22 Name 23 Street Address 24 City, St, Zip		☐ Change ☐ Addition

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 above, or on an attachment with an address.

SIGNATURE: _____ 4/28 VP
SIGNATURE AND TYPED OR PRINTED NAME OF MAKING OFFICER OR DIRECTOR — Date — Capacity

0081137 CP