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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Shirley B. Mortimer
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000014557 (1)**

1. Corporation Name

DALFFIC TOURS INT'L. INC.



Principal Place of Business

**9723 NE 2ND AVE
MIAMI SHORES FL 33138**

Mailing Address

**9723 NE 2ND AVE
MIAMI SHORES FL 33138**

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**RAVENEAU, JASMIN C
835 NE 171 ST
N MIAMI BEACH FL 33162**

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 607.0602 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

J. Raveneau

5-30-96

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

**VD
RAVENEAU, JASMIN C
835 NE 171ST STREET
MIAMI BEACH FL 33162**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

**TD
RAVENEAU, VETTE E
835 NE 171ST STREET
MIAMI BEACH FL 33162**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

**SD
RAVENEAU, ANNETTE M
835 NE 171ST STREET
MIAMI BEACH FL 33162**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

**D
BROWN, LIRA
835 NE 171ST ST.
MIAMI BEACH FL 33162**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

**PD
RAVENEAU, FRANK A JR.
835 NE 171ST ST.
N. MIAMI BEACH FL 33162**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption under 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 registered agent 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:

J. Raveneau
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-30-96

DATE

**305
754-5773**

ENTER OFFICE

05/31/1996

CR2E034 (12/95)