SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Saridra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P93000020826	(2)

	TRAVEL, INC.	Mailing Address			
ORLANDO FL 32806 O		3407 CONWAY GARDENS ORLANDO FL 32806	S RD		
US		US		3. Date Incorporated or Qualified 03/19/1993	3a. Date of Last Report 05/01/1995
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	A -10	Suite, Apt. #, etc		59-3178722	Not Applicable \$8.75 Additional
Suite, Apt.	. #, eic	27		5. Certificate of Status Desired	Fee Required
City & Sta	le	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	
24	25	29	30		Yes No
	9. Name and Address of Curr	rent Registered Agent	81 Name	10. Name and Address of New Re	egistered Agent
MI	LLAN, CINDY V				
	107 CONWAY GARDENS ROAD)	82 Street Ad	ddress (P.O. Box Number is Not Acceptat	bie)
Of	RLANDO FL 32806		83		•
			84 City		FL 85 Zip Code
44 Duraman	to the previouse of Sections 607.0	1602 and 607 1609, Florida Statut	ne the above named co	roorstoo subpute this statement for the r	
11. Pursuant office or agent 1:	t to the provisions of Sections 607.0 registered agent or both, in the Starm familiar with, and accept the ob	oligations of, Section 607.0505, Fit	orida Statutes		
agent I	am familiar with, and accept the ob-	ragent and title disport ratio (NO	orida Statutes It flegi tered Agent signature re		CIARE
agent 1	am familiar with, and accept the ob-	oligations of, Section 607.0505, Fit	orida Statutes	gwed when roustweg)	CIARE
agent I: SIGNATURE	am familiar with, and accept the ob- Signal me typed or profest carrier of registered OFFICERS D	ligations of, Section 697,0905, Fix agent and offent applicable (NO AND DIRECTORS	It fleg: brod Agent signature re	Typed when renshring) ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIRECTORS IN 12
agent 1: SIGNATURE 12.	Signal me typod or profiled came of registered OFFICERS D MILLAN, CINDY V	ligations of, Section 697,0905, Fix agent and offent applicable (NO AND DIRECTORS	TE Regulered Agent signature of 13. 11 Title	Typed when renshring) ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIRECTORS IN 12
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ruor mersoy certify that the information supplied with this iming is volontally turnished and dues not qualify for the exemption stated in Section 1.19 section 1.19 for the further certify that the information indicated on this 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 617, Florida Statutes; and that my name appears of Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: (Lidy V. M. LLan CINDY V. MILLAN 6/17/96 (467) 240-6697