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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P93000025323 (5)

**VACATION IN PARADISE WHOLESALE TRAVEL. INC.** 

Principal Place of Business

SIGNATURE!

Mailing Address

11924 N. FOREST HILL BLVD.. #26 WEST PALM BEACH FL 33414 11924 N. FOREST HILL BLVD.. #26 WEST PALM BEACH FL 33414

## FILED May 19 1998 8:00am Secretary of State



4/17/98 561-791-3667

WEST PALM BEACH FL 33414 WEST PALM BEACH FL 33414 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/06/1993 2. Principal Place of Business
11//198 Polo CUMB ROAD 2a. Mailing Address 4. FEI Number Applied For 26 11198 POLO CLUB ROAD 65-0400428 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 WELLINGTON 28 WELLINGTON Trust Fund Contribution Added to Fees Country This corporation owes or has paid the current year Intangible 30 PALM BEACH 29 33414 25 PACM BEACH Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **BLUTSTEIN, GEORGE J** 20801 BISCAYNE BLVD Street Address (P.O. Box Number is Not Acceptable) SUITE 501 83 **AVENTURA FL 33180** A4 City 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 Signature, typed or printed name of registered agent and lifle it applicable. (NOTE: Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE Change Addition TITLE SCHWARTZ, ALAN NAME 1.2 NAME 11818 PEBBLEWOOD DRIVE STREET ADDRESS 1.3 STREET ADDRESS WEST PALM BEACH FL 33414 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change ■ Addition NAME 2 2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change TITLE 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 14. Thereby 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 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 sm 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 chapter 607 and that my name appears in Block 12 or Block 13 if chapter 607.

ALAN SCHWARTZ