FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

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SIGNATURE:

P93000066802 (8)

i. Corporation	MENT # P9300(RAVEL & TOURS, INC.	0066802 (8	5)						
Principa! Place	of Rucinass	Mailing Address					 		
1111 LINCOLN 4TH FLOOR MIAMI BEACH	.N. RD.	1111 LINCOLN RD. 4TH FLOOR MIAMI BEACH FL 3313	39			2 Public registed as O selfed	To- Date		5
						3. Date Incorporated or Qualified 09/24/1993	3a. Date 03	of Last 1	•
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number			Applied For
Suite, Apt. #	#. etc.	Suite, Apt. #, etc.				65-0486764		\$8.7	Not Applicable 5 Additional
22		27				5. Certificate of Status Desired			Required
City & State)	City & State				Election Campaign Financing Trust Fund Contribution			00 May Be led to Fees
Zιρ 24	Country 25	Zip 29	Cou	untry		8. This corporation has liability for	intangible ta		
	9. Name and Address of Current	t Registered Agent		81	Nome	10. Name and Address of New I	Registered A	gent	
MECHAN	MIC BOV		!						
MECHAN 1111 LIN	NCOLN RD., 4TH FL.		!	82	Street Add	dress (P.O. Box Number is Not Acceptal	ole)		
	EACH FL 33139		!	83		*************************************			
				84	City		FL	85 2	Zıp Code
or registere	to the provisions of Sections 607,0502 ed agent, or both, in the State of Florid th, and accept the obligations of, Section	da. Such change was authoriz	zed by the c	oorpa oorpa	named corpo oration's boa	oration submits this statement for the pu ard of directors. I hereby accept the app	rpose of cha	. L. L. nging its registere	registered office ad agent. I am
SIGNATURE _	Signature, typed or prin ed name of registered agent a	and title if applicable (Nf	OTE: Registere:	- 	nt signature requir	red when reinstating)	DATE	·	
12.	OFFICERS AND	O DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	FICERS AND		
TITLE	D	☐ DELETE	1. 1 70	ITLE] Change	Addition
NAME OVER LABORES	ROTH, ROBERT	100	1.2 NA						
STREET ADDRESS	1111 LINCOLN RD., 4TH FLO MIAMI BEACH FL 33139	UK			ADDRESS				
CITY-ST-ZIP THILE	MIMMI DENOTT IE 33138	☐ DELETE	2.17i	ITY-SI IIILE	1- 219		———	Change	e
NAME		- اسبوا	2.2 NA				_] ~ •	□ ········
STREET ADDRESS					ADDRESS				
CITY - S1 - ZIP				ITY-\$1					
1016		☐ DELETE	3 171	ITLE		,		Change:	Addition
NAME			3 2 NA	AME		•			
STREET ADORESS			3.3. S	TREET	T ADDRESS				
CITY-ST-ZIP		□ DELETE		17Y-S1	1-ZIP			Change	- I Addition
TITLE		☐ DELETE	4. 1 TI				L] Change	e 🔲 Addition
NAME STREET ADDRESS			4.2 NA		ADDRESS				
CITY-ST-ZIP				ITY-SI					
TITLE		DELETE	5 1 TI		1-2"		E	Change	Addition
NAME			5 2 NA	AME				_	
STREET ADDRESS			53 ST	TREET	ADDRESS				
CITY - S1 - ZIP			5.4 CI	ITY-SI	T-ZIP				
TITLE		☐ DEFELE	6 1 TI	ITLE				Change:	Addition
NAME	/ /	١	6 2 NA	AME					
STREET ADDRESS	///)	63 ST	(REET	ADDRESS				
CITY-ST-ZIP			6 4 CI	11Y - ST	T - ZIP				
14. I do hereby certify that oath; that I appears in	y certify that the information supplied the information included of his annual am an office or property of he corp. Block 12 or Block 20 than an office of the corp.	vith this tiling is voluntarily furn al report or supplemental ann ration or the receive of trusts an attachment will an add	nished and on all report in see empower frees.	does s tru red t	s not qualify le and accurate the execute the	for the exemption stated in Section 119 rate and that my signature shall have the his report as required by Chapter 607, F	.07(3)(k), Flor same legal e lorida Statute	ida Stati effect as es; and ti	utes. I further if made under hat my name