

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P93000075373 (9)**

1. Corporation Name

CHAMBERS TRAVEL, INC.



Principal Place of Business

Mailing Address

~~1549 E. COMMERCIAL~~
~~HOUSTON TRAVEL~~
~~FT. LAUDERDALE FL 33334~~
~~US~~

~~1549 E. COMMERCIAL~~
~~FT. LAUDERDALE FL 33334~~
~~US~~

2. Principal Place of Business

21 **1051 HUSBORO Mile**

Suite, Apt. #, etc

22 **905**

City & State

23 **HUSBORO BEACH, FL**

Zip

24 **33062**

County

25 **US**

2a. Mailing Address

26 **1051 HUSBORO Mile**

Suite, Apt. #, etc

27 **905**

City & State

28 **HUSBORO BEACH, FL**

Zip

29 **33062**

Country

30 **US**

3. Date Incorporated or Qualified

10/29/1993

3a. Date of Last Report

04/27/1995

4. FEI Number

65-0470319

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

8. This corporation has liability for intangible tax under s. 190.032, Florida Statutes

☐

Yes

☒

No

10. Name and Address of New Registered Agent

g. Name and Address of Current Registered Agent

CHAMBERS, WINIFRED

~~1549 E. COMMERCIAL~~

~~FT. LAUDERDALE FL 33334~~

1051 HUSBORO Mile # 905

HUSBORO BEACH, FL 33062

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

85. State

86. Zip Code

87. Country

88. Date

89. Signature

90. Title

91. Date

92. Signature

93. Title

94. Date

95. Signature

96. Title

97. Date

98. Signature

99. Title

100. Date

101. Signature

102. Title

103. Date

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119. Signature

120. Title

121. Date

122. Signature

123. Title

124. Date

125. Signature

126. Title

127. Date

128. Signature

129. Title

130. Date

11. Pursuant to the provisions of Sections 607.0502 and 607.1108, 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 607.1108, Florida Statutes.

SIGNATURE **Winifred Chambers, MD**

1 May 1996

Signature of the corporation's chief executive officer or other authorized officer

Signature of the registered agent

Date

12. OFFICERS AND DIRECTORS

12.1 TITLE

12.2 NAME

12.3 STREET ADDRESS

12.4 CITY-ST-ZIP

12.5 TITLE

12.6 NAME

12.7 STREET ADDRESS

12.8 CITY-ST-ZIP

12.9 TITLE

12.10 NAME

12.11 STREET ADDRESS

12.12 CITY-ST-ZIP

12.13 TITLE

12.14 NAME

12.15 STREET ADDRESS

12.16 CITY-ST-ZIP

12.17 TITLE

12.18 NAME

12.19 STREET ADDRESS

12.20 CITY-ST-ZIP

12.21 TITLE

12.22 NAME

12.23 STREET ADDRESS

12.24 CITY-ST-ZIP

12.25 TITLE

12.26 NAME

12.27 STREET ADDRESS

12.28 CITY-ST-ZIP

12.29 TITLE

12.30 NAME

12.31 STREET ADDRESS

12.32 CITY-ST-ZIP

12.33 TITLE

12.34 NAME

12.35 STREET ADDRESS

12.36 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY-ST-ZIP

13.5 TITLE

13.6 NAME

13.7 STREET ADDRESS

13.8 CITY-ST-ZIP

13.9 TITLE

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY-ST-ZIP

13.13 TITLE

13.14 NAME

13.15 STREET ADDRESS

13.16 CITY-ST-ZIP

13.17 TITLE

13.18 NAME

13.19 STREET ADDRESS

13.20 CITY-ST-ZIP

13.21 TITLE

13.22 NAME

13.23 STREET ADDRESS

13.24 CITY-ST-ZIP

13.25 TITLE

13.26 NAME

13.27 STREET ADDRESS

13.28 CITY-ST-ZIP

13.29 TITLE

13.30 NAME

13.31 STREET ADDRESS

13.32 CITY-ST-ZIP

13.33 TITLE

13.34 NAME

13.35 STREET ADDRESS

13.36 CITY-ST-ZIP

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)(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 it 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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1 May 1996

Daytime Phone #

954-783-2212

CR2E034 (12/95)