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PROFIT CORPORATION ANNUAL REPORT



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

1996

	'A RICA PARADISE	93000075490 (TOURS, INC.	')		1 18611661 HG 18168 HHI ARHI BRIH BRI	iji ba lib Ja lili (a a	I I Baba Gra) (B) (B) (B) (B) (B) (B) (B) (B) (B) (B
	e of Busness	Mailing Address	Mailing Address					
5245 NW 36TH ST Suite 206 Miami Springs FL 33166		5245 NW 36TH ST SUITE 205 MIAMI SPRINGS FL						
					3. Date Incorporated or Qualified 11/01/1993	3a. Date		•
Principal Pt	lace of Business	2a. Mailing Address	····		4. FEI Number	<u> </u>	/18/19	Applied For
Cuito A. I	W	26			65-0447147			Not Applicab
Suite, Apt. Oity & State		Suite, Apt. #, etc.		·-···	5. Certificate of Status Desired			Additional Required
Zip	-···	City & State			Election Campaign Financing Trust Fund Contribution		Adde	O May Be d to Fees
	25 Country	21p [29]	Country 30			3 □ No		199.032,
	5. Isame and Address	of Current Registered Agent	81	Name	10. Name and Address of New F	A benetalger	gent	
SUBBO*	T, JOYCE				(0.0.0)			
5245 NW 36TH ST			82	Street Add	dress (P.O. Box Number is Not Acceptab	ole)		
SUITE 2			83					
MIAMI S	SPRINGS FL 33166		84	City			85 Zu	p Code
Pursuant to	to the provisions of Sections	s 607.0502 and 607.1508. Florida Statu	ites, the above-na	med coro	oration submits this statement for the num	FL		
- familiär wit SNATURE	th, and accept the obligation	ns of, Section 607.0505, Florida Statute	es.	ration's DO	oration submits this statement for the purad of directors. I hereby accept the app	rpose of chan ointment as re	lging its registered	egistered offi l agent. I am
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SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/14/96 (305)884-3955