## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998

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## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P93000087431 (1)

TOURS IN THE SHIN INC

**FILED** May 04 1998 8:00am Secretary of State

TOONS HE THE SON- INC.								
Principal Plac	e of Rusiness	Mailing Address					JANKA JOHN HODII OLDON	
		<del>-</del>				1		
7300 TROUVILLE ESPLANADE MIAMI BEACH FL 33141		7300 TROUVILLE ESPLANADE MIAMI BEACH FL 33141						
tankhan manata is makasi					DO NOT WRITE IN	THIS SPACE		
						3. Date Incorporated or Qualified		
						12/17/1993		
	lace of Business	2a. Mailing Address	Mailing Address			4. FEI Number	<b>—</b>	Applied For
21	# at-	Suite, Apt. W. etc.				65-0457296		Not Applicable
Suite, Apt. #, etc.		<del>} _ ,</del>				5. Certificate of Status Desired		Additional Required
City & State		City & State						<u> </u>
23		28				6. Election Campaign Financing Trust Fund Contribution		O May Be of to Fees
Zip Country			Zip Country			8. This corporation owes or has paid t		
24	<u></u>			10		Personal Property Tax due June 30		∏ No
	9. Name and Address of Current		1001			10. Name and Address of New Regis		=
SE	QUERA, DOMI C			B1	Name			
7300 TROUVILLE ESPLANADE				82	Cton at A alaba	ss (P.O. Box Number is Not Acceptable)		
MIAMI BEACH FL 33141				02	Street Addres	ss (P.O. Box Number is Not Acceptable)		
•	- THE CO. 10 THE CO. 17 THE CO. 1		1	83				
							121 4	
				84	City		FL 85 Zi	o Code
<ol> <li>Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agont, or both, in the State of Florida Such change was authoriz agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida St</li> </ol>					named corpo he corporatio	ration submits this statement for the purpors board of directors. I hereby accept the	ose of changing he appointment	its registered is registered
	m ramiliar with, and accept the obligate	ons of, Section 607.0505, FE	orida Stat	utes.				i
SIGNATURE	Signature, typed or printed name of registered agent	and thir if applicable (NO)	F Registered	Agent	signature required	1 when reinstating)	CATE	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICER	S AND DIRECTO	DRS IN 12
TITLE	Р	DELETE	1.1 10	'LE			Change	Addition
NAME	MANAGAN, SUNNY R		1.2 NAME					
STREET ADDRESS	7300 TROUVILLE ESPLANADE		1.3 STREE		ODRESS			li
CITY - ST - ZIP	MIAMI BEACH FL 33141		1.4 CI	ry-ST-1	ZIP			]
TITLE	V	DELETE	2 1 T)	LE.			☐ Change	Addition (
NAME	MANAGAN, RICHARD D		22 NA	ME	1		N. 64	
STREET ADDRESS	7300 TROUVILLE ESPLANADE		23 ST	23 STREET ADDRESS				İ
CITY - ST - ZWP	MIAMI BEACH FL 33141		2. 4 CITY - ST - ZIP		ZIP			
TITLE	ST	ST DELETE 3.1		L.E			Change	Addition
NAME	SEQUERA, DOM! C		3.2 NA	ME				
STREET ADDRESS	7300 TROUVILLE ESPLANADE		3.3 ST	REET AD	DORESS			ļ
CITY-ST-ZIP	MIAMI BEACH FL 33141		34. CI	TY-ST-	ZIP			
TITLE		☐ DELETE	41 711	LE			☐ Change	Addition
NAME			4. 2 N	AME	-			
STREET ADDRESS			4.3 STREET A		DRESS			-
CITY-ST-ZIP			4.4 CITY - ST-		ZIP			
TITLE		☐ DELETE	5.1 TIT	LE			L Change	Addition
NAME			5.2 NA	ME				ļ
STREET ADDRESS			5.3 STREET A		DDRESS			
CITY-ST-ZIP			5 4 CII	Y-ST-	ZIP			
TITLE		☐ DELETE	6 1 TIT	<b>LE</b>			Change	: Addition
NAME			6.2 NAM					
STREET ADDRESS			6.3 ST	REET AD	)DRESS			1
CITY-ST-ZIP				6.4 CITY-ST-ZIP				
14. I hereby of	certify that the information supplied with	this filing does not qualify f	or the exe	mptio	n stated in S	ection 119.07(3)(i), Florida Statutes I furi	ther certify that t	ne 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 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: