

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 06, 1999 8:00 am
Secretary of State

04-06-1999 90094 007 ***150.00

DOCUMENT # P94000003174

1. Corporation Name

REMINGTON TRAVEL SERVICES, INC.



Principal Place of Business

Mailing Address

~~XXXX ST CENTRAL AVENUE X~~
~~XXXX ST PETERSBURG FL 33710 X~~

11936 Seminole Blvd.
Largo, FL 33778

6600 SUNSET WAY
#121
ST PETERSBURG FL 33706
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/13/1994

4. FEI Number

59-3217214

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BACON, DAVID A
2929 FIRST AVENUE NORTH
ST. PETERSBURG FL 33713

81 Name

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

83

84 City

FL

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE

NAME REMINGTON, CARL R
STREET ADDRESS 6600 SUNSET WAY
CITY-ST-ZIP ST. PETERSBURG BEACH FL 33706

1.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME REMINGTON, MAEDEL
STREET ADDRESS 6600 SUNSET WAY
CITY-ST-ZIP ST. PETERSBURG BEACH FL 33706

2.1 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME SHARER, LARRY
STREET ADDRESS 100 SECOND AVENUE SOUTH #606
CITY-ST-ZIP ST. PETERSBURG FL 33706

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby 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 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, with all other like empowered.

SIGNATURE:

Carl Remington President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/22/99

727 585 6500

0407592

CR25034 (11/98)