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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P94000027272 (1)

BANCOR LEADERS IN TRAVEL, INC.

Principal Place of Business	Mailing Address	
C/O 1 SE 3RD AVE STE 980 MIAMI FL 33131	C/O 1 SE 3RD AVE STE 980 MIAMI FL 33131	DO NOT WRITE IN THIS SPACE
US	US	3. Date Incorporated or Qualified 01/26/1994
2. Principal Place of Business	2a. Mailing Address	4. FEI Number Applied For
21	26	65-0487103 Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired See Required
City & Stato	City & State	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country 25	Zip Co 29 30	Sountry 8, This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Ro		10. Name and Address of New Registered Agent
LESLIE ALAN ROZENCWAIG, ESQ. 1 S.E. 3RD AVE. STE 960		81 Name 82 Street Address (P.O. Box Number is Not Acceptable)
MIAMI FL 33131		83

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.

City

SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition TITLE 1.1 TITLE Change LIMA, CARLOS NAME 1.2 NAME 1 S.E. 3RD AVE, STE 950 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33131 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TIFLE LIMA, CARMEN 2.2 NAME NAME 1 S.E.3RD AVE, STE 950 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33131 2.4 CITY-ST-ZIP CITY-SI-ZIP DELETE Change Addition TITLE D\$ 3.1 TITLE LIMA, ANTONIO NAME 3.2 NAME 1 S.E. 3RD AVE, STE 950 3.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33131 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change ☐ Addition 4.1 TITLE TIFLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change ☐ Addition 6.1 TITLE TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. I hereby certify that the information supplied with this Him Qoes 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 applied 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 receipt of truesdee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed or one my alargiment with an address.

SIGNATURÉ:

REGUERED

FILED

Apr 15 1998 8:00am

Secretary of State

Zip Code