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

PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATI

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400029705 (8)

CITI LIMIT TRANSPORTATION AND TOURS, INC.

Principal Place of Business Mail

Mailing Address

FILED Jul 07 1998 8:00am Secretary of State



760 E. DAYTO FT. LAUDERD/			760 E. DAYTON CIRCLE FT. LAUDERDALE FL 33312			DO NOT WRITE IN THI S S PACE
						3. Date Incorporated or Qualified 04/19/1994
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number Applied For
21		26				65-0484326 Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired See Required \$8.75 Additional Fee Required
City & State		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country Zip Co			intry	1	8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. Yes No
Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent
row é , wayne e				81 Name		
	E, DAYTON CIRCLE		82 5		Street A	Address (P.O. Box Number is Not Acceptable)
FT.	LAUDERDALE FL 33312		-			
				84	City	85 Zip Code
				ll		FL
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 femiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Signature: typand or present name of registered agent and title of applicable (NOTE: Registered Agent signature required when reinstating) DATE						
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 Ti	TLE		SECRETARY Change LAddition
NAME	ROWE, WAYNE E		1.2 N	1.2 NAME		RASHELLE COWE
STREET ADDRESS	76 0 E. DAYTON CIRCLE		1.3 STREET ADDRE		ADDRESS	160 E DAY TON CINCLE
CITY-ST-ZIP	FT. LAUDERDALE FL 33312		1.4 CITY-ST-ZIP		1 - ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 SECRETARY Change Addition RAS Helle Rowe TET Early TO STATE TO ST
TITLE		☐ DELETE	DELETE 21 TITLE			Change Addition
NAME			2 2 NAME			
STREET ADDRESS			235	TREET	ADDRESS	
CITY-ST-ZIP	<u> </u>		2.40	ATY-5	ST-ZIP	
TITLE		☐ DELETE	3111	TLE		Change Addition
NAME			3.2 N	AME		
STREET ADDRESS			33 S	TREET	ADDRESS	
CITY-ST-ZIP			3.4. 0	HY-S	ST-ZIP	
TITLE		☐ DELETE	DELETE 4.1 TITLE			Change Addition
NAME			4.2 N	IAME	- 1	
STREET ADDRESS			4.3 S	TREET	ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST - ZIP		IT-ZIP	
TITLE		☐ DELETE	5.1 TI	5.1 TITLE		Change Addition
NAME			5.2 N	AME		
STREET ADDRESS			5.3 STREET ADDRESS		ADDRESS	
CITY-ST-ZIP			5.4 CITY - ST - ZIP		T-ZIP	,
TITLE	DELETE	6.1 TITLE			☐ Change ☐ Addition	
NAME			6 2 NAME		1	800002584128) //
STREET ADDRESS			6.3 \$	TREE 1	ADDRESS	-07/03/9801032 03 0 ///
CITY+ST-ZIP			6 4 CHY-		51 - Z IP	***150.00
14. I hereby o	ertify that the information supplied	with this filing does not qualify	for the ex-	emp	ition state	d 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 logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or truster employees to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, into an attachment with an address.