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

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORFORATIONS

## DOCUMENT # P9400036114 (4)

NEW WORLD TOURS AND TRAVEL SERVICES. INC.

Principal Place of Business Mailing Address
8040 S.W. 16THG COURT 6040 S.W. 16THG COURT
PLANTATION FL 33317-5204 PLANTATION FL 33317-5204

## FILED Apr 25 1997 8:00am Secretary of State



PLANTATION F	FL 33317-5204		PLANTATION FL 33317-5204							
							3. Date Incorporated or Qualified 06/01/1994		te of Last 18/1996	
2. Principal P	Place of Busin	ess	2a. Mailing Address			4. FEI Number Applied For				
21			26			65-0496434 N			Not Applicable	
Sulte, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State			City & Stato			Election Campaign Financing     Trust Fund Contribution		<b>\$5.00</b> May Be Added to Fees		
Zip <b>24</b>	25 29 30			30	intry	,	8. This corporation has liability for intengible tax under s. 199.032, Florida Statutes Yes \(\sigma\) No			
		and Address of Curre	nt Registered Agent				10. Name and Address of New Re	gistered	Agent	
	NACHI, MAF			:	81	Name				
	0 S.W. 16TI				82 Street Add		Idress (P.O. Box Number is Not Acceptab	le)		
PLA	NTATION F	L 33317-5204						,		
					83					
					84	City			85 Zir	Code
								FL.	1 1 1	
office or r agent. I a	to the provisi regislered ag am familiar wi	ons or Sections 607.051 ent, or both, in the Stati th, and accept the oblig	uz and 607.1508, Florida Stat e of Florida. Such change wa jahons of, Section 607.0505,	tutes, the at is authorize Florida Stat	oove d by utes	e-named co the corpo s.	orporation submits this statement for the p ration's board of directors. I hereby accep	urpose of It the app	changing ointment a	its registered s registered
SIGNATURE	Signature, lyped	or printed name of registered ag	oroit and title if applicable. (N	IOTE: Rogistored	d Age	nt signature re-	quired when reinstating)	DATE		
12.		OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND		
TITLE	D		☐ DELEJE	1.1 1)	TL F				Change	Addition
NAME		I, MARA O		1.2 N/	ME					
STREET ADDRESS		7. 16TH COURT ION FL 33317-5204		1.3 ST	REET	ADDRESS				
CITY-ST-ZIP	PLANIAI	ION FL 33317-3204	Dogge	14 CI		T-ZIP				
TITLE	İ		☐ DELETE	211					Change	Addition
NAME				2 2 N/						
STREET ADDRESS				1		ADDRESS				
CITY-ST-ZIP TITLE			☐ DELETE	2. 4 C 3.1 Ti		S1 - 7IP			Change	☐ Addition
NAME			been	3.2 NA					Change	☐ Addition
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP				3.4. C						
TITLE			DELETE	4.1 1/1		71 - 217			Change	Addition
NAME				4. 2 N	AME				3	
STREET ADDRESS				4.3 ST	REE1	ADDRESS				
CITY-ST-ZIP				4.4 CI	1Y - S	1 - ZIP				
TITLE			☐ DELETE	5.1 111					Change	Addition
NAME				5.2 NA	ME					
STREET ADDRESS				5.3 ST	REFT	ADDRESS				
CITY-ST-ZIP				5.4 CI	Y-\$	T - 71P				
TITLE			DELETE	6.1 TR	LE				☐ Change	Addition
NAME				6.2 NA	ME	ĺ				
STREET ADDRESS				6381	REET	ADDRESS				
CITY-ST-7IP				6.4.00	rv er	7.D				

14. I do 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.