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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400036352 (0)

DELGADO TRAVEL OF NEW YORK, INC.

FILED Apr 16 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 4214 18TH AVENUE 79-08 ROOSEVELT AV HIALEAH FL 33012 JACKSON HEIGHTS NY 11372 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/13/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0514988 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Country Ζφ Country B. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes ☐ No 30 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent REYES, ROSA L 81 Name 42-14 W. 16TH AVE. 82 Street Address (P.O. Box Number is Not Acceptable) HIALEAH FL 33012 83 84 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 registrired agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE **DELGADO. HECTOR** NAME 1.2 NAME 79-08 ROOSEVELT AVE. STREET ADDRESS 1.3 STREET ADDRESS JACKSON HEIGHTS NY 11372 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE ☐ Change Addition TITLE 2.1 TITLE **DELGADO, JEANNETTE** NAME 2.2 NAME 79-08 ROOSEVELT AVE. STREET ADDRESS 2.3 STREET ADDRESS JACKSON HEIGHTS NY 11372 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE ☐ Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 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 copier 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 or an attachment with an address.