FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995 (1-95)

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 PM 1:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000044804 (0)

1. Corporation Name
ALI'S TRAVEL & TOURS, INC.

Principal Place of Business	Mailing Address
16740 N. W. 60TH COURT MIAMI LAKES FL 33016	16740 N. W. 60TH COURT MIAMI LAKES FL 33016

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 06/10/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 125 S west 46 st #25	26 125 S w 46 st
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc. #25
23 City & State: HIA FL 33012	28 City & State: HIA FL
24 Zip	25 Country: USA
	29 Zip: 33012
	30 Country: USA

4. FEI Number: 65-0496283 ☐ 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

7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
NUNEZ, ROLANDO 16740 N. W. 60TH COURT MIAMI LAKES FL 33016	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	PRESIDENT	☒ Change ☐ Addition
NAME	NUNEZ, ROLANDO	1.2 NAME	NUNEZ ROLANDO	
STREET ADDRESS	16740 N. W. 60TH COURT	1.3 STREET ADDRESS	125 S W 46 ST #25	
CITY-ST-ZIP	MIAMI LAKES FL 33016	1.4 CITY-ST-ZIP	HIALEAH FL 33012	
TITLE	D	2.1 TITLE	I	☒ Change ☐ Addition
NAME	NUNEZ, ALINA	2.2 NAME	NUNEZ ALINA	
STREET ADDRESS	16740 N. W. 60TH COURT	2.3 STREET ADDRESS	125 S W 46 ST #25	
CITY-ST-ZIP	MIAMI LAKES FL 33016	2.4 CITY-ST-ZIP	HIALEAH FL 33012	
TITLE		3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Rolando Nunez 4/26/95 557-5522
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000L44 CP