SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT

1995

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

FILED
1995 AUG -3 AM 9:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000045735 (5)**

1. Corporation Name

TRAVEL OPPORTUNITIES RESORT AND MARKETING, INC.

Principal Place of Business	Mailing Address
1471 SW 12TH AVE. #203 POMPANO BEACH FL 33060	1471 SW 12TH AVE. #203 POMPANO BEACH FL 33060

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 06/15/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 2701 WEST OAKLAND PK. BLVD.	26 2701 WEST OAKLAND PK. BLVD
Suite, Apt. #, etc. 22 100	Suite, Apt. #, etc. 27 100
City & State 23 FT. LAUDERDALE, FL	City & State 28 FT. LAUDERDALE, FL
Zip / County 24 33311 / 25 BROWARD	Zip / County 29 33 / 30

4. FEI Number: 65-0504810 ☐ 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

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

9. Name and Address of Current Registered Agent

VERRILLO, JAMES
1471 SW 12TH AVE.
#203
POMPANO BEACH FL 33060

10. Name and Address of New Registered Agent

81 Name: JAMES VERRILLO
82 Street Address (P.O. Box Number is Not Acceptable): 2701 W. OAKLAND PK BLVD
83: SUITE 100
84 City: FT. LAUD. FL 85 Zip Code: 33311

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: X James A Verrillo
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE	PRESIDENT	☒ Change ☐ Addition
NAME	VERRILLO, JAMES	12 NAME	JAMES VERRILLO	
STREET ADDRESS	1471 SW 12TH AVE., SUITE 203	13 STREET ADDRESS	2701 WEST OAKLAND PK. BLVD. STE 100	
CITY-ST-ZIP	POMPANO BEACH FL 33060	14 CITY-ST-ZIP	FT. LAUD. FL 33311	
TITLE		21 TITLE		☐ Change ☐ Addition
NAME		22 NAME		
STREET ADDRESS		23 STREET ADDRESS		
CITY-ST-ZIP		24 CITY-ST-ZIP		
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY-ST-ZIP		34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

CR2E034 (3/95)

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)(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.

SIGNATURE: X James A Verrillo JAMES VERRILLO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/29/95 (305) 485 0708
Date Daytime Phone #

0032023 CP