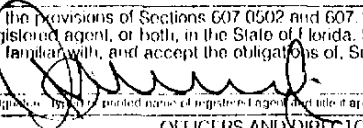
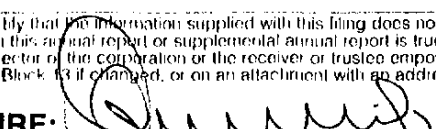


FILED

Sep 14 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS		Sep 14 1998 8:00am Secretary of State	
DOCUMENT # 1. Corporation Name P94000046865 ((9))					
BBTUR-VIAGENS E TURISMO INC					
Principal Place of Business 1SE 3rd AVE SUITE 940 MIAMI FL 33131		Mailing Address 1SE 3rd AVE SUITE 940 MIAMI FL 33131		DO NOT WRITE IN THIS SPACE.	
2. Principal Place of Business 21 State, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 State, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 06/22/1994 4. FEI Number 65-0566644 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 owes or has paid the current year Intangible Personal Property Tax due June 30 ☒ Yes ☐ No	
9. Name and Address of Current Registered Agent FLAVIO JOSE DE ALMEIDA COELHO 1 SE 3rd AVE SUITE 940 MIAMI FL 33131				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE  (NOTE: Registered Agent signature required when reinstating) DATE					
12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE ☐ DELETE SD NAME SOARES PAULO JOSE STREET ADDRESS 168 SE 1ST SUITE 1102 CITY, ST, ZIP MIAMI FL 33131				1.1 TITLE ☐ Change ☐ Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY, ST, ZIP	
2. TITLE ☐ DELETE D NAME BEZERRA DE ARAUJO PAULO JOSE STREET ADDRESS 168SE 1ST #1102 MIAMI FL33131 CITY, ST, ZIP				2.1 TITLE ☐ Change ☐ Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY, ST, ZIP	
3. TITLE ☐ DELETE D NAME ATTIE SIDNEY A STREET ADDRESS 168SE 1ST #1102 MIAMI FL33131 CITY, ST, ZIP				3.1 TITLE ☐ Change ☐ Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY, ST, ZIP	
4. TITLE ☐ DELETE NAME STREET ADDRESS CITY, ST, ZIP				4.1 TITLE ☐ Change ☐ Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY, ST, ZIP	
5. TITLE ☐ DELETE NAME STREET ADDRESS CITY, ST, ZIP				5.1 TITLE ☐ Change ☐ Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY, ST, ZIP	
6. TITLE ☐ DELETE NAME STREET ADDRESS CITY, ST, ZIP				6.1 TITLE ☐ Change ☐ Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 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 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.				000002638980 -09/14/98--01142--013 ***150.00 08/19/98 305-371-7270	
SIGNATURE: 				SIGNATURE AND TITLE OF REGISTERED AGENT OR DIRECTOR DATE DAYTIME PHONE #	

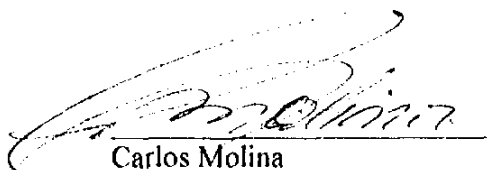
(2)

Division of Corporations
P.O. BOX 6327
Tallahassee FL 32314

Per instructions from Division Of Corporations, I am attaching a check in the amount of \$150.00 for the annual report fee with my application.

I also state that I have not received any notice from the Division of Corporations in respect with my corporation BBTUR-VIAGENS E TURISMO, INC.

Thank you for your courtesy in this matter.



Carlos Molina
Accounting Department