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PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

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Mar 19 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P94000048855 (8)

ROUNDTREE TOURS, INC.

Principal Place of Business Mailing Address 7345 N.W. 52ND STREET 7345 N.W. S2ND STREET LAUDERHILL FL 33319 LAUDERHILL FL 33319-6312 3. Date Incorporated or Qualified 3a. Date of Last Report 06/29/1994 04/24/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0504717 26 Not Applicable Suite Apt #, etc. Suite, Apt. #. etc \$8.75 Additional Γ 5. Certificate of Status Desired Fee Required 22 27 City & Starc City & State \$5.00 May Be 6. Election Campaign Financing П 23 28 Trust Fund Contribution Added to Fees Country Zφ Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes X No 24 29 30 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ROUNDTREE, HOLLY 7345 NW 52ND STREET 82 Street Address (P.O. Box Number is Not Acceptable) **LAUDERHILL FL 33319** 83 City 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. Familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE_Registered Agent signature required when reinstating) . Signature, take the prodest carge of regeternal agree and tile if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 13. DELETE Change Addition HHE 1.1 JUIGE ROUNDTREE, HOLLY NAME 1.2 NAME **CR2E034** 7345 NW 52ND STREET 1.3 STREET ADDRESS STREET ADDRESS LAUDERHILL FL 33319 1.4 CITY - ST - 7IP DELETE Change Addition 1016 2: THE NAME 22 NAMI 2 3 STREET ADDRESS STREET ADDRESS C-11 - S1 - 20P 2 4 CITY - ST - ZIP DELETE ■ Addition 3.1 TITLE TPUE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS 3.4. CITY-ST-ZIP City S7, 28 DELETE ☐ Change Addition THEF 4.1 TITLE NAME 4 2 NAME ADDRÉSS 4.3 STREET ADDRESS SIEEL 4.4 CITY - ST- ZIP City-Si DELETE 5.1 TITLE Change Addition 1016 N4.43 5.2 NAME STREET ACCURESS 5.3 STREET ADDRESS 5.4 CITY - \$1 - ZIP Off St 70 DELETE Add tion THE 6.1 TITLE Change M4.76 6.2 NAME 6.3 STREET ADDRESS STREE ADDRESS

SIGNATURE: 4/24/2 (954) 349-60

14. Too fereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the

6.4 CITY - ST - 7(P

information indicated on this armunitreport or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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