

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED

1995 JUL 27 AM 10:18

TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # P94000051362 (9)

1. Corporation Name
FIESTA SPORTS AND TRAVEL, INC.

Principal Place of Business
2784 CHAPARRAL DR
MELBOURNE FL 32934

Mailing Address
2784 CHAPARRAL DR
MELBOURNE FL 32934

3. Date Incorporated or Qualified
07/12/1994

3a. Date of Last Report

4. FEI Number
59-3280540

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

25

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

LOPEZ, JOHN L
2784 CHAPARRAL DR
MELBOURNE FL 32934

10. Name and Address of New Registered Agent

81 Name
KAREN L. LAWS

82 Street Address (P.O. Box Number is Not Acceptable)
2784 CHAPARRAL DRIVE

83

84 City
Melbourne

85 Zip Code
FL 32934

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 *Karen L. Laws* President 6/6/95

(NOTE: Registered Agent signature required when certifying.)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	11 TITLE		11 TITLE		☐ Change	☐ Addition
NAME	LOPEZ, JOHN L	12 NAME		12 NAME			
STREET ADDRESS	2784 CHAPARRAL DR	13 STREET ADDRESS		13 STREET ADDRESS			
CITY, ST, ZIP	MELBOURNE FL 32934	14 CITY, ST, ZIP		14 CITY, ST, ZIP			
TITLE	D	21 TITLE		21 TITLE		☒ Change	☐ Addition
NAME	KIDD, PATRICIA M	22 NAME		22 NAME			
STREET ADDRESS	807 LEVITT PKWY	23 STREET ADDRESS		23 STREET ADDRESS			
CITY, ST, ZIP	ROCKLEDGE FL 32955	24 CITY, ST, ZIP		24 CITY, ST, ZIP			
TITLE	D	31 TITLE		31 TITLE		☒ Change	☐ Addition
NAME	LAWS, KAREN L	32 NAME		32 NAME			
STREET ADDRESS	2784 CHAPARRAL DR	33 STREET ADDRESS		33 STREET ADDRESS			
CITY, ST, ZIP	MELBOURNE FL 32934	34 CITY, ST, ZIP		34 CITY, ST, ZIP			
TITLE		41 TITLE		41 TITLE		☐ Change	☒ Addition
NAME		42 NAME		42 NAME			
STREET ADDRESS		43 STREET ADDRESS		43 STREET ADDRESS			
CITY, ST, ZIP		44 CITY, ST, ZIP		44 CITY, ST, ZIP			
TITLE		51 TITLE		51 TITLE		☐ Change	☒ Addition
NAME		52 NAME		52 NAME			
STREET ADDRESS		53 STREET ADDRESS		53 STREET ADDRESS			
CITY, ST, ZIP		54 CITY, ST, ZIP		54 CITY, ST, ZIP			
TITLE		61 TITLE		61 TITLE		☐ Change	☐ Addition
NAME		62 NAME		62 NAME			
STREET ADDRESS		63 STREET ADDRESS		63 STREET ADDRESS			
CITY, ST, ZIP		64 CITY, ST, ZIP		64 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 110.07(3)(b), 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: *Karen L. Laws*
KAREN L. LAWS President/DIRECTOR

6/6/95 407-259-0211