

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000053476 (5)

1. Corporation Name

SPECIALTY TICKETS, INC.



Principal Place of Business

Mailing Address

2955 VINELAND RD
SUITE 065
KISSIMMEE FL 34746
US

% 200 EAST ROBINSON ST.
SUITE 065
ORLANDO FL 32801

3. Date Incorporated or Qualified
07/20/1994

3a. Date of Last Report
03/17/1995

2. Principal Place of Business

2a. Mailing Address

21 4853 W. IRLD

25 4853 W. IRLD

Suite, Apt. #, etc

Suite, Apt. #, etc

22 BRONSON HWY.

27 BRONSON HWY.

City & State

City & State

23 Kissimmee FL.

28 Kissimmee

Zip

Country

Zip

Country

24 34746

25 DSCDIA

29 FL.

30 DSCDIA

4. FEI Number
59-3258976

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

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

AIDI, JUDY A
2784 GRANTHAM CT
ORLANDO FL 32835

81 Name

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

5728 MAJOR BLVD. Suite 220

83

84 City

ORLANDO

FL

85 Zip Code

32819

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

Judy Aidi - President 8-5-96

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE P
NAME AIDI, JUDY A
STREET ADDRESS 2784 GRANTHAM CT
CITY-ST-ZIP ORLANDO FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE Aidi, Judy A.
12 NAME 5728 MAJOR BLVD. Suite 220
13 STREET ADDRESS ORLANDO, FL. 32819
14 CITY-ST-ZIP

☒ Change ☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

☐ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

☐ Change ☐ Addition

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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

Judy Aidi
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/5/96

407-370-0877