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May 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000068446 (1)

1. Corporation Name

EURO TRAVEL SPECIALISTS, INC.

Principal Place of Business

3860 GULF BLVD.
ST. PETERSBURG BEACH FL 33706

Mailing Address

3860 GULF BLVD.
ST. PETERSBURG BEACH FL 33706-3933



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21 2445 64th Av. S.		26 2445 64th Av. S.		09/12/1994	05/01/1996
22 Suite, Apt. #, etc. # 276		27 Suite, Apt. #, etc. # 276		4. FEI Number	Applied For
23 St. Petersburg, FL		28 St. Petersburg, FL		65-0523369	Not Applicable
24 33712		29 33712		5. Certificate of Status Desired	\$8.75 Additional Fee Required
25 U.S.A.		30 U.S.A.		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
26 33712		30 U.S.A.		7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

DUMBAUGH, JOHN D
1900 RINGLING BLVD.
SARASOTA FL 34236

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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	1.1 TITLE	D
NAME	SCHROEDER, EIKE	1.2 NAME	SCHROEDER, EIKE
STREET ADDRESS	3860 GULF BLVD	1.3 STREET ADDRESS	2445 64th Av. S., #276
CITY - ST - ZIP	ST. PETERSBURG BEACH FL	1.4 CITY - ST - ZIP	St. Petersburg, FL 33712
TITLE	D	2.1 TITLE	D
NAME	WANDER, JOACHIM	2.2 NAME	Wander, Joachim
STREET ADDRESS	HUMBOLDTSTR 14	2.3 STREET ADDRESS	EUROPCENTER 16.09
CITY - ST - ZIP	65189 WIESBADEN GE	2.4 CITY - ST - ZIP	10789 Berlin - Germany
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do 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.

SIGNATURE:

Eike Schroeder
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/97 (813) 867-3176
DATE DAYTIME PHONE

0374390

CR2E034 (9/96)