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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000071707 (1)

VALUE INTERNATIONAL TRAVEL, INC.

FILED
Apr 28 1997 8:00am
Secretary of State

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Principal Place of Business Mailing Address B635 N.W. 1ST STREET 9635 N.W. 1ST STREET MIAMI FL 33128 MIAMI FL 33126-8327 US				3. Date Incorporated or Qualified	3a. Date of Le		
and the second second second					09/29/1994	05/01/199	
2. Principal Place of Business 2s. Mailing Address				4. FEI Number	 	Applied For	
21 Suite, Apt. #, etc.		Suite, Apt. #, etc.			65-0526555		Not Applicable 75 Additional
Suite, April #, etc.			-		5. Certificate of Status Desired	3 7	e Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution		.00 May Be
Zip 24	Country 25	Zip	Countr 30	У	8. This corporation has liability for		
9.	Name and Address of Curren		15-1		10. Name and Address of New Re	gistered Agent	
LLANEZA,			81	Name			
2355 N.W. FLAGLER TERR MIAMI FL 33125			82	Street Add	ress (P.O. Box Number is Not Acceptab	le)	
MIAMI FL	33163		83	 			
			84	City		FL 85	Zip Code
SIGNATURE Signal.	Figure 2 pointed name of registeric age OFFICERS AND		13.	ent signarure requi	red when reinslating) ADDITIONS/CHANGES TO OFFICE	DATE CERS AND DIREC	
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	NORTHWEST 1 STREET		1.3 STREE	T ADDRESS			
CITY ST-ZIP MIA	MI FL 33126		1.4 CITY-	ST-ZIP		·	
THE		☐ DELETE	2.1 TiTL€	}		☐ Cha	nge 🔲 Addition
NAM			2.2 NAME				
STREET ADDRESS				T ADDRESS	·	*	
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STREET ADDRESS			•	T ADDRESS			•
CITY - ST - 2IF			3.4, C/TY	1			
TITLE		DELETE	4.1 TITLE			☐ Cha	nge Addition
NAME			4. 2 NAM	1			•
STREET ADDRESS				T ADDRESS			
Olly-St. Zer			4.4 CITY- 5.1 TITLE	ST-ZIP			
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1		☐ DELETE				L. Cha	nge Addition
e (part 1 Aprended		☐ DELETE	5.2 NAME	1		L] Una	nge Addition
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STREEL ADDRESS CITY - ST - Z-P Tille	A company of the control of the cont	☐ DELETE	5.2 NAME	T ADDRESS		Cha	

SIGNATURE:

appears in Block 12 or Block

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING SPECER OR DIRECTOR DIRECTOR DIRECTOR

6.3 STREET ADDRESS

14. Life hereby certly 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 information indicated on this innual report or supplier/cental 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 rederver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Florick 13 if changed, or organ latachment with an address.