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

APPROVED AND FILED

95 MAY -1 PM 12:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000072155 (2)

1. Corporation Name

COAST TO COAST TOURS, INC.

Principal Place of Business	Mailing Address
6216 PEREGRINE COURT ORLANDO FL 32819-7565	6216 PEREGRINE COURT ORLANDO FL 32819-7565

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/28/1994

3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 7080 LAKE ELLENOR DRIVE	26 7080 LAKE ELLENOR DRIVE
Suite, Apt. #, etc 22 SUITE # 122	Suite, Apt. #, etc 27 SUITE # 122
City & State 23 ORLANDO = FLORIDA	City & State 28 ORLANDO = FLORIDA
Zip / Country 24 32809-5756 / 25 U.S.A.	Zip / Country 29 32809-5756 / 30 U.S.A.

4. FEI Number: 59 - 327372 0 ☐ 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

9. Name and Address of Current Registered Agent

CAMPANO, SOLEDAD
6216 PEREGRINE COURT
ORLANDO FL 32819-7565

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: (Typed or printed name of registered agent and the date) (If new Registered Agent, signature required after new entry)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	CAMPANO, SOLEDAD	12 NAME	
STREET ADDRESS	6216 PEREGRINE COURT	13 STREET ADDRESS	
CITY ST ZIP	ORLANDO FL 32819-7565	14 CITY ST ZIP	
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	ANDRADE, LUIZ J	22 NAME	
STREET ADDRESS	6216 PEREGRINE COURT	23 STREET ADDRESS	
CITY ST ZIP	ORLANDO FL 32819-7565	24 CITY ST ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	INOJOSA, MARCELO R	32 NAME	
STREET ADDRESS	6000 OAKBEND STREET, APT. 7201	33 STREET ADDRESS	
CITY ST ZIP	ORLANDO FL 32835	34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

5/16

14. I (or Person) certify that the information supplied with this filing is voluntarily furnished and 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: [signature] JANUARY, 11th 1995 (407) 430-8611

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SOLEDAD CAMPANO

0061700 CP