

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

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # P94000074869 (6)

1. Corporation Name
EXECUTIVE CORPORATE TRAVEL, INC.

Principal Place of Business

**2500 N.W. 79TH AVE.
MIAMI FL 33122**

Mailing Address

**2500 N.W. 79TH AVE.
MIAMI FL 33122**

**APPROVED
AND
FILED**

MAY -1 AM 9:10

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/12/1994		3a. Date of Last Report	
2. Principal Place of Business 21 Suite, Apt. #, etc.		2a. Mailing Address 26 Suite, Apt. #, etc.	
22 City & State		27 City & State	
23 Zip		28 Zip	
24 Country		29 Country	
30		31	
4. FEI Number 65-0537318		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

**LOPEZ, JORGE A
2500 N.W. 79TH AVE.
MIAMI FL 33122**

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

FL

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 of registered agent or registered agent in charge of the corporation. (NOTE: Registered Agent signature required when instituting a change.)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE D	1. NAME DEL TORO, RODOLFO	1.1 TITLE P	1.1 NAME ALVAREZ, JOSE M.
2. STREET ADDRESS 2500 N.W. 79TH AVE.	2. STREET ADDRESS MIAMI FL 33122	2.1 TITLE D/C	2.1 NAME ALVAREZ, JOSE M.
3. CITY, ST, ZIP MIAMI FL 33122	3. CITY, ST, ZIP MIAMI FL 33122	2.2 TITLE D/V	2.2 NAME SOTO, JOHN M.
4. TITLE D	4. NAME DEL TORO, RODOLFO	2.3 TITLE D/V	2.3 NAME SOTO, JOHN M.
5. STREET ADDRESS 2500 N.W. 79TH AVE.	5. STREET ADDRESS MIAMI FL 33122	2.4 TITLE D/T	2.4 NAME TORRES, ED S.
6. CITY, ST, ZIP MIAMI FL 33122	6. CITY, ST, ZIP MIAMI FL 33122	2.5 TITLE S	2.5 NAME LOPEZ, JORGE A.
7. TITLE D	7. NAME DEL TORO, RODOLFO	2.6 TITLE S	2.6 NAME LOPEZ, JORGE A.
8. STREET ADDRESS 2500 N.W. 79TH AVE.	8. STREET ADDRESS MIAMI FL 33122	2.7 TITLE S	2.7 NAME LOPEZ, JORGE A.
9. CITY, ST, ZIP MIAMI FL 33122	9. CITY, ST, ZIP MIAMI FL 33122	2.8 TITLE S	2.8 NAME LOPEZ, JORGE A.
10. TITLE D	10. NAME DEL TORO, RODOLFO	2.9 TITLE S	2.9 NAME LOPEZ, JORGE A.
11. STREET ADDRESS 2500 N.W. 79TH AVE.	11. STREET ADDRESS MIAMI FL 33122	2.10 TITLE S	2.10 NAME LOPEZ, JORGE A.
12. CITY, ST, ZIP MIAMI FL 33122	12. CITY, ST, ZIP MIAMI FL 33122	2.11 TITLE S	2.11 NAME LOPEZ, JORGE A.

14. I, the undersigned, certify that the information supplied with this filing was truthfully furnished and does not qualify for the exemption stated in Sections 199.032 and 199.033, Florida Statutes. I further certify that the information indicated on this annual report is 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 registered agent in charge of the corporation. I understand my obligations to maintain this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of this filing as an officer or director of the corporation.

SIGNATURE:

Jorge A. Lopez, Secretary
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/95

305-711-0000

Telephone Number