## 2006 FOR PROFIT CORPORATION

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ANNUAL REPORT				Apr 10, 2000 08:00 A			
DOCUMENT # P94000085116					Secretai	y of State	
NAPLES TRANSPORTATION & TOURS, INC.				}			
	e of Business	Mailing Address		}			
1010 6TH A Naples, Fl		1010 6TH AVE SOUTH NAPLES, FL 34102 US					
,,,,, <u>220</u> , , 2				} 	am anun sum sum esta unte ducar cu	#( #((#L 1/\$#) (1#3# #15(##) )) (##)	
DO NOT WRITE IN THIS SPA			^E	01052006	No Chg-P CR	E034 (11/05)	
			CE	4. FEI Number 65-0536		Applied For Not Applicable	
					f Slatus Desired	\$8.75 Additional	
	8. Name and Address of Current Re-	pistered Agent	_ <del></del>	<u></u>	<del></del>	Fee Required	
SMITH, RA	ANDALI			80.1	UOT MOIT	- <del></del>	
9120 THE LANE NAPLES, FL 34109			}		NOT WRIT		
NAPLES, I	rL 34109		}	IN T	HIS SPAC	E	
			}		}		
8. The above	named entity submits this statement for the	purpose of changing its register	ed office or register	ed agent, or both,	, in the State of Florida. I a	ım familiar with, and accept	
					<del>-</del>		
SIGNATURE	Signature typed or printed name of registered agent and t	ne ir applicable. (NOTE Registere	d Agent signature /aquired	when reinstating)	DAT	ξ:	
FiL After M	E NOW!!! FEE IS \$150.00 by 1, 2006 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.		00 May Be ed to Fees	}		
10.	OFFICERS AND DIR	ECTORS		<del></del>	1		
TITLE NAME	SMITH, RANDALL R		Į		{		
STREET ADDRESS CITY-ST-ZIP	9120 THE LANE NAPLES, FL 34109		l		}		
TITLE	1471 663,16 34130		1			••	
NAME OTREST ARREST OR			Į		U000004999 04V25/ <b>05</b> -0000		
STREET ADDRESS ( CTTY-51-ZTP			ĺ		( )	I GET TOOLOG	
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CHY-ST-ZIP		;	Į.		(		

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

DILE NAME STREET ADDRESS

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR