

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000085185 (4)

1. Corporation Name

V & R TRAVEL, INC.



Principal Place of Business

1717 N. BAYSHORE DR.
#2350
MIAMI FL 33132

Mailing Address

1717 N. BAYSHORE DR.
#2350
MIAMI FL 33132

3. Date Incorporated or Qualified

11/22/1994

3a. Date of Last Report

03/27/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

65-0560995

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

10. Name and Address of New Registered Agent

MENDOZA-FRIEDHEIM, ROSA M
1717 N. BAYSHORE DR.
#2350
MIAMI FL 33132

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 607.1506, 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 individual or entity authorized to sign this report

DATE

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ DELETE

1. TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
MENDOZA-FRIEDHEIM, ROSA M
1717 N. BAYSHORE DR. #2350
MIAMI FL 33132

☐ Change ☐ Addition

☐ DELETE

2. TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
STD
FRIEDHEIM, RAYMOND L
1717 N. BAYSHORE DR. #2350
MIAMI FL 33132

☐ Change ☐ Addition

☐ DELETE

3. TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
LOTAN, VIC
225 E. 74 ST #6P
NEW YORK NY

☐ Change ☐ Addition

☐ DELETE

4. TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

☐ DELETE

5. TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

☐ DELETE

6. TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/96 (305) 8926140
Date
Daytime Phone #

CR2E034 (12/95)