SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P94000086759 (5)**

1. Corporation Name

TRAVEL PRESS, INC.

Principal Place of Business	Mailing Address
220 MIRACLE MILE SUITE 220 CORAL GABLES FL 33134 US	~~300 ARAGONAVE, 110~~ 220 Miracle Mile ~~CORAL GABLES FL 33134~~ Suite 220 Coral Gables.

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified: 11/30/1994	3a. Date of Last Report: 01/25/1995
21	26 220 Miracle Mile	4. FEI Number: 65-0536770	☐ Applied For ☐ Not Applicable
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 Suite 220	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
City & State 23	City & State 28 Coral Gables / FL	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
Zip 24 / Country 25	Zip 29 33134 / Country 30 USA	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
CEVALLOS, RICARDO ~~300 ARAGONAVE, 110~~ ~~CORAL GABLES FL 33134~~	81 Name 82 Street Address (P.O. Box Number is Not Acceptable): 220 Miracle Mile 83 Suite 220 84 City: Coral Gables FL 85 Zip Code: 33134

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: RCC · of Travel Press, DP — DATE: 6-7-96
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating.)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP CEVALLOS, RICARDO 300 ARAGONAVE, 110 CORAL GABLES FL 33134	☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	DP CEVALLOS, RICARDO 220 Miracle Mile, Suite 220 Coral Gables, FL 33134 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS CEVALLOS, NELSON 300 ARAGONAVE, 110 CORAL GABLES FL 33134	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	DS CEVALLOS, NELSON 220 Miracle Mile, Suite 220 Coral Gables, FL 33134 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT CEVALLOS, PABLO 300 ARAGONAVE, 110 CORAL GABLES FL 33134	☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	DT CEVALLOS, PABLO 220 Miracle Mile., Suite 220 Coral Gables, FL 33134 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	300001886043 -07/08/96--01036--035 ***225.00 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	DP ☐ Change ☐ Addition JP

CR2E034 (3/96)

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)(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: RCC · of Travel Press, DP — DATE: 6-7-96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0160003 FR