2001 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P 95000007447 1. Entity Name ELKA TRAVEL, INC. 02 JAN 25 AM 2: 57 SECRETARY OF STATE TAINAHASSEE, FLORIDA DO NOT WRITE IN THIS SPACE 3. Mailing Address 2. Principal Place of Business 3651 W DIXIE HWY SAME Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State NORTH MIAMI, FLORIDA SAME Not Applicable Zip \$8.75 Additional Country Country Zip 5. Certificate of Status Desired Fee Required 33161 USA SAME SAME 7. Name and Address of Current Registered Agent DO NOT WRITE IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) January 1 - May 1 Fee is \$150.00 🛴 👬 9. This corporation is eligible to satisfy its Intangible After May 1, Fee is \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Amended UBR is \$61.25 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. E034B (12/01 TITLE TITLE PRESIDENT NAME NAME CHATEL, KARELE 9970 SW 136 CT STREET ADDRESS STREET ADDRESS CITY STEZIE. CITY - ST - ZIP MIAMI, FL TITLE TITLE 900004853169 NAME NAME -02/01/02--01044--010 STREET ADDRESS STREET ADDRESS ****300:00 ****3**00.**00 CITY-ST-ZIP CITY-ST-ZIP TITLE NAMÉ NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP IN THIS SPACE TITLE NAME * * STREET ADDRESS STREET ADDRESS CITY-ST-7iP CITY-ST-ZIP 900004853169 TITLE NAME NAME -02/01/02--01044--011 STREET ADDRESS STREET ADDRESS ******8.75。******8.7 CITY-ST-ZIP CITY-ST-ZIP TITLE TIT! F 900004853169 NAME -02/01/02---01044---012 STREET ADDRESS STREET ADDRESS ******8.75 ******8.75 CITY-ST-ZIP CITY-ST-ZIP 13. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 of true true empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an approximation of the corporation of the receiver of true true empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an approximation of the receiver of true true empowered to execute this report is true. of the corporation or the receiver attachment with an address, with 01-19-02 305-899-1011 SIGNATURE:

IGNING OFFICER OR DIRECTOR



13651 W. DIXIE HWY. N.MIAMI, FL 33161

TEL: 305-899-1011 FAX: 305-899-1014

2017

01-19-02

DIVISION OF CORPORATIONS UNIFORM BUSINESS REPORT FILINGS P.O.BOX 1500 TALLAHASSEE, FL 32302-1500

Gentlemen,

Attached please find the Uniform Business Report for the years 2001 and 2002 duly completed and signed.

Please note that we have never received any correspondence or notification of filing for this report thus we are filing the two years together. Please note also that we have changed address.

Enclosed please find two checks: \$ 300.00 for the two years filing and \$ 8.75 for a Certificate of Status for 2002.

We certainly would appreciate your cooperation in this matter.

Sincerely,

KARELE CHATEL

President and Registered Agent.