

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P95000018880 (1)**

1. Corporation Name

POINCIANA TRAVEL, TOURS & CRUISES, INC.

Principal Place of Business

**14121 S.W. 75TH STREET
MIAMI FL 33183**

Mailing Address

**14121 S.W. 75TH STREET
MIAMI FL 33183**



2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

9. Name and Address of Current Registered Agent

**CANALES-GALVEZ, GISELA C
14121 S.W. 75TH STREET
MIAMI FL 33183**

3. Date Incorporated or Qualified

03/08/1995

3a. Date of Last Report

N/A

4. FEI Number

65-056237

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

10. Name and Address of New Registered Agent

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 607.07, 607.08 and 607.09, 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, Sections 607.07-09, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

12a. NAME
12b. STREET ADDRESS
12c. CITY, STATE, ZIP
12d. TITLE
12e. NAME
12f. STREET ADDRESS
12g. CITY, STATE, ZIP
12h. TITLE
12i. NAME
12j. STREET ADDRESS
12k. CITY, STATE, ZIP
12l. TITLE
12m. NAME
12n. STREET ADDRESS
12o. CITY, STATE, ZIP
12p. TITLE
12q. NAME
12r. STREET ADDRESS
12s. CITY, STATE, ZIP
12t. TITLE

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

13.

13a. NAME
13b. STREET ADDRESS
13c. CITY, STATE, ZIP
13d. TITLE
13e. NAME
13f. STREET ADDRESS
13g. CITY, STATE, ZIP
13h. TITLE
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13o. CITY, STATE, ZIP
13p. TITLE
13q. NAME
13r. STREET ADDRESS
13s. CITY, STATE, ZIP
13t. TITLE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I hereby certify that the information submitted 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 filing is true and accurate and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the registered agent or transfer agent of the corporation. I do execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 or changes to or deletions of Block 12 or 13.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gisela Canales-Galvez
Gisela Canales-Galvez

1/16/96 305-386-7777
Date of Filing

CR2E034 (12/95)