## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



HI ORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## FILED May 19 1998 8:00am Secretary of State

	MENT # P95000 Y TRAVEL SERVICES, INC.	1022162 (8)		1 (\$41)881 HE 1516 SIN TON TON BENK 81	iku bana ndia nasa jirib dinib kali desi
Principal Place of Business Mailing Address					LIST ON IEN EINEN EINNE EENEN NESTA 1101 1001
3305 N. OCEAN BLVD.		3305 N. OCEAN BLVD.			
FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL		FT. LAUDERDALE FL 333	08	DO NOT WRITE	E IN THIS SPACE
				3. Date Incorporated or Qualified	IN THIS SPACE
				03/20/1995	,
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 26		26		65-0584172	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 · City & State		Cota & State		C. Continuate of example	Fee Required
23 °	0	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28	Country	Trust Fund Contribution	Added to Fees
24	25	<u>}</u> - ¬	30	This corporation owes or has pa Personal Property Tax due June	
	9. Name and Address of Current		[00]	10. Name and Address of New Re	
MARTINEZ, DAVID W. 81 Name				Pelody R. Laurich	G.A.
14750 NW 77TH COURT SUITE 335			82 Street Add	iress (P.O. Box Number is Not Acceptat	
#318 .			399	10 Shekidan st	Suite 108
MIAMI LAKES FL 33016			83		
			84 City /_Z		<b>85</b> Z <u>ip</u> Code
44.5			1 70	ollywood	FL
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  Signature type of the purpose of changing its registered Agent signature required when refistating)  DATE OF THE PURPOSE OF THE PURP					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	Fraggetti. Yvette		1.2 NAME		
STREET ADDRESS	2541 BAYVIEW DRIVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERADLE FL 33305		1.4 CITY - ST - ZIP		
TITLE	D MATKUNG LODI I	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	WATKINS, LORI J		2.2 NAME		
STREET ADDRESS	729 S.W. 2ND COURT	_	2 3 STREET ADDRESS		
CITY-ST-ZIP	HALLANDALE FL 33309	DELETE	2. 4 CITY-ST-ZIP		Character L 44495ca
TITLE NAME	HEDGES, LA DONNA J	TEL OETE IE	3 1 TITLE 3.2 NAME		L. Change L. Addition
	1376 N.W. 127TH DRIVE				
STREET ADDRESS CITY-ST-ZIP	SUNRISE FL 33323		3.3 STREET ADDRESS 3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME		<b></b>	4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 City - St - ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-7IP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAMF		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		

14. I hereby 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 annual report or supplemental annual report is true and accurate and that my signalure 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 enpowered 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.

CIONATURE TO 1/1

4/24/98

921 029-9823