

4-7-98 B 4236 C  
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Apr 07 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000047455 (7)**

1. Corporation Name

**EXODUS TRAVEL, INC.**

Principal Place of Business

**13673 S.W. 26TH ST.  
MIAMI FL 33175**

Mailing Address

**13673 S.W. 26TH ST.  
MIAMI FL 33175**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**06/16/1995**

4. FEI Number

**65-0588956**

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 <b>5755 West Flagler St</b>	26
22 Suite, Apt. #, etc. <b># 212</b>	27 Suite, Apt. #, etc.
23 City & State <b>MIAMI, FL</b>	28 City & State
24 Zip <b>33144</b> 25 Country <b>DADE</b>	29 Zip 30 Country

9. Name and Address of Current Registered Agent

**CABRERA, JORGE  
1502 S.W. 71ST AVE.  
MIAMI FL 33144**

10. Name and Address of New Registered Agent

81 Name	<b>CABRERA, MARGARITA</b>
82 Street Address (P.O. Box Number is Not Acceptable)	<b>1500 S.W. 71st AVE</b>
83	
84 City	<b>MIAMI, FL</b>
85 Zip Code	<b>33144</b>

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

*Margarita Cabrera*

Signature typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>PD</b>	1.1 TITLE	<b>PD</b>
NAME	<b>CABRERA, JORGE</b>	1.2 NAME	<b>CABRERA, MARGARITA</b>
STREET ADDRESS	<b>5755 W FLAGLER ST 212</b>	1.3 STREET ADDRESS	<b>5755 W. Flagler St 212</b>
CITY-ST-ZIP	<b>MIAMI FL</b>	1.4 CITY-ST-ZIP	<b>MIAMI FL</b>
TITLE	<b>STD</b>	2.1 TITLE	
NAME	<b>CABRERA, MARGARITA</b>	2.2 NAME	
STREET ADDRESS	<b>5755 W FLAGLER ST 212</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>MIAMI FL</b>	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
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 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:

*Margarita Cabrera*

305-260-4440

CR2E034 (10/97)