

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/26/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

APPROVED
AND
FILED

1996 SEP 20 PM 9: 32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

700001968897
-10/09/96--01034--016
*****70.00 *****70.00

AMENDED PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95-0000-62183

1. Corporation Name

Tourist Exchange, Inc.

Principal Place of Business

Mailing Address

1682 Collins Ave.
Miami Beach, FL 33139

Mailing:
same

2. Principal Place of Business

21 ~~33000~~ 1682 Collins

2a. Mailing Address

26 same

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

23 Miami Beach, FL

28 City & State

28

24 Zip

24 33139

25 Country

25 Dade

29 Zip

29

30 Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Janet Levenson
1682 Collins Ave.
Miami Beach, FL 33139

81 Name Yoram Raz

82 Street Address (P.O. Box Number is Not Acceptable)

82 1682 Collins Ave.

83

84 City

84 Miami Beach

85 FL

85

85 Zip Code

85 33139

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, last name, first name of registered agent and title (if applicable)

Registered Agent 9-10-96

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP
1.1 NAME Janet Levenson
1.2 STREET ADDRESS 1682 Collins Ave.
1.3 CITY-ST-ZIP Miami Beach, FL 33139

TITLE NAME STREET ADDRESS CITY-ST-ZIP
2.1 NAME
2.2 STREET ADDRESS
2.3 CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP
3.1 NAME
3.2 STREET ADDRESS
3.3 CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP
4.1 NAME
4.2 STREET ADDRESS
4.3 CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP
5.1 NAME
5.2 STREET ADDRESS
5.3 CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP
6.1 NAME
6.2 STREET ADDRESS
6.3 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President
1.2 NAME Yoram Raz
1.3 STREET ADDRESS 1682 Collins Ave
1.4 CITY-ST-ZIP Miami Beach, FL 33139

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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)(k), 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:

Signature and typed on printed name of signing officer or director

Former registered agent / president

Signature and typed on printed name of signing officer or director

New registered agent / President

305-674-9096

CR2E034 (3/96)