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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

P95000066214 (4)

LET'S TRAVEL, INC.



	Business	Mailing Address						
160 HERON BA	Y CIRCLE	160 HERON BAY CIR LAKE MARY FL 3274						
LAKE MARY FL	. 32746	CAKE MARTITE SET	·		3. Date incorporated or Qualified 08/28/1995	3a. Da	te of Last Rep	port
	-10-2000	2a. Mailing Address			4. FEI Number		1	pplied For
2. Principal Place	of Business	26			59-333282	9		ot Applicable
Suite, Apt #, e	to	Suite Apt. #, etc			5. Certificate of Status Desired			Additional
Stille, Apr. #, 6		27						equired
City & State		City & State	,		6. Election Campaign Financing			May Be to Fees
3		28	,		Trust Fund Contribution			
Zip	Couritry	Zφ	Countr	У	B. This corporation has liability for Florida Statutes	intangibie No	tax tinuer s	199.002,
4	25	29	30		10. Name and Address of New I		d Agent	
	9. Name and Address of Currer	nt Registered Agent	8	1 Name	10. 148/10 8/10 /	<u> </u>		
						ETAY		
rogers,			8	2 Street Addr	ress (P.O. Box Number is Not Acceptal	DIE)		
	uth U.S. 17-92		8	3				
FERN PA	RK FL 32730		"	"				
			8	4 City		F	[_ 85 Zip	Code
				- acted cores	ration submits this statement for the purify of directors. Thereby accept the app	mose of o	changing its re	egistered offic
familiar with,	agent, or both, in the State of Fior and accept the obligations of, Security is specified and other security and all the state of the security and all the s	HOLLOW YORK ST. KANSAN ORKANI		jumi sagmature respons	ration submits this statement for the pured of directors. I hereby accept the applicable in the pure statement for the pure statement for the pure purely accept the applicable in the purely accept the purely ac	DATE		
		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OF	FICERS A		
12.	DPS	DELETE	1 1 11/1	,F			☐ Change	Addition
TIFLE	DPS ROGERS, GAIL		1 1 THU 1 2 NAM				Change	Addition
TIFLE NAME	ROGERS, GAIL		1.2 NAM				☐ Change	Addition
TITLE NAME STREET ADDRESS	ROGERS, GAIL 160 HERON BAY CIRCLE		1.2 NAM . 1.3 STR	ns .				
TIFLE NAME	ROGERS, GAIL		1.2 NAM 1.3 STR 1.4 C/TY 2. 1 TH	PELT ADDRESS T - ST - ZIP LE			Change	Addition
TIFLE NAME STREET ADDRESS CITY-SI-ZIP TIFLE	ROGERS, GAIL 160 HERON BAY CIRCLE LAKE MARY FL 32746	☐ DELETE	1.2 NAM 1.3 STR 1.4 C/TY	PELT ADDRESS T - ST - ZIP LE				
TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME	ROGERS, GAIL 160 HERON BAY CIRCLE LAKE MARY FL 32746 DVT	☐ DELETE	1 2 NAM 1 3 STR 1.4 C/TY 2 1 T/T 2 2 NAM	PELT ADDRESS T - ST - ZIP LE				
TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	ROGERS, GAIL 160 HERON BAY CIRCLE LAKE MARY FL 32746 DVT ROGERS, GLENN	☐ DELETE	1 2 NAM 1 3 S IR 1.4 C/IY 2 1 T II 2 2 NAM 2 3 S IR 2 4 C IT	FET ADDRESS F-ST-ZIP LE ME ME METADORESS Y-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME	ROGERS, GAIL 160 HERON BAY CIRCLE LAKE MARY FL 32746 DVT ROGERS, GLENN 8155 SOUTH U.S. 17-92	☐ DELETE	1 2 NAM 1 3 S IR 1 4 C ITY 2 1 T III 2 2 NAM 2 3 S IR	FET ADDRESS F-ST-ZIP LE ME ME METADORESS Y-ST-ZIP				Addit-on
TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	ROGERS, GAIL 160 HERON BAY CIRCLE LAKE MARY FL 32746 DVT ROGERS, GLENN 8155 SOUTH U.S. 17-92	☐ DELETE	1 2 NAM 1 3 STR 1.4 C/TV 2 1 TTC 22 NAM 23 STR 24 C/T 3 1 T/T 32 NAM	FELL ADDRESS F-ST-ZIP LE AGE AGE FACTOR ADDRESS FY-ST-ZIP LE ME			☐ Change	Addit-on
TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE	ROGERS, GAIL 160 HERON BAY CIRCLE LAKE MARY FL 32746 DVT ROGERS, GLENN 8155 SOUTH U.S. 17-92	☐ DELETE	1 2 NAM 1 3 STR 1.4 C/TV 2 1 TTC 22 NAM 23 STR 24 C/T 3 1 T/T 32 NAM	FELL ADDRESS T-ST-ZIP LE AGE AGE ADDRESS Y-ST-ZIP LE		40.	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	ROGERS, GAIL 160 HERON BAY CIRCLE LAKE MARY FL 32746 DVT ROGERS, GLENN 8155 SOUTH U.S. 17-92	DELETE	1 2 NAM 1 3 STR 1.4 CITY 2 1 TIT 22 NAM 23 STR 24 CIT 3 1 TIT 32 NAT 33 ST 34 CIT	EEL ADDRESS T-ST-ZIP LE AE MEEL ADDRESS Y-ST-ZIP LE ME ME MEEL ADDRESS Y-ST-ZIP LE ME ME MEEL ADDRESS Y-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME	ROGERS, GAIL 160 HERON BAY CIRCLE LAKE MARY FL 32746 DVT ROGERS, GLENN 8155 SOUTH U.S. 17-92	☐ DELETE	1 2 NAM 1 3 STR 1.4 C/TV 2 1 TIT 2 2 NAM 23 STR 24 C/T 3 1 TIT 32 NAM 33 ST 34 C/T 4 1 TIT	EET ADDRESS Y-ST-ZIP AE AE AE AE AE AE AE AE AE A			☐ Change	Addition
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TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE	ROGERS, GAIL 160 HERON BAY CIRCLE LAKE MARY FL 32746 DVT ROGERS, GLENN 8155 SOUTH U.S. 17-92	DELETE	1 2 NAM 1 3 STR 1.4 C/T [*] 2 1 TII 2 2 NAM 2 3 STR 2 4 C/T 3 1 TII 3 2 NAI 3 3 ST 3 4 C/T 4 1 TI 4 7 NA 4 3 ST	RELET ADDRESS Y-ST-ZIP LE ME ME ME MEFT ADDRESS Y-ST-ZIP LE ME ME MEFT ADDRESS Y-ST-ZIP LE ME ME MERET ADDRESS			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME NAME NAME NAME NAME	ROGERS, GAIL 160 HERON BAY CIRCLE LAKE MARY FL 32746 DVT ROGERS, GLENN 8155 SOUTH U.S. 17-92	DELETE	1 2 NAM 1 3 STR 1.4 C/TY 2 1 TIT 2 2 NAM 23 STR 24 C/T 3 1 TIT 32 NAF 33 ST 34 C/T 4 1 TIT 47 NA 43 ST 44 C/T	FEET ADDRESS Y-ST-ZIP AE AE AE AE AE AE AE AE AE A			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	ROGERS, GAIL 160 HERON BAY CIRCLE LAKE MARY FL 32746 DVT ROGERS, GLENN 8155 SOUTH U.S. 17-92	DELETE	1 2 NAM 1 3 STR 1.4 C/TY 2 1 TIL 2 2 NAM 2 3 STR 2 4 C/T 3 1 TIL 3 2 NA/ 3 3 ST 3 4 C/T 4 1 TIL 4 7 NA 4 3 ST/ 4 4 C/T	RELET ADDRESS Y-ST-ZIP LE ME ME MEFT ADDRESS Y-ST-ZIP LE ME ME MEFT ADDRESS Y-ST-ZIP LE ME			Change	Addition Addition
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certify that the information indicated druthis annual report or simplemental annual report is true and accurate and that my soath, that I am an officer or director of the corporation or the relever or trustee empowered to execute this report as required appears in Block 12 or Block 13 if granged, or on an attachment with an address

SIGNATURE:

ING OFFICER OR DIRECTOR

4-20-96 321-4428