

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

PROFIT
CORPORATION.
ANNUAL REPORT
1996



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

DOCUMENT # P95000069989 (8)

1. Corporation Name

T-P OF SARASOTA, INC.

TRAVEL PLANNERS OF SARASOTA, INC.



Principal Place of Business

6624 GATEWAY AVE
SARASOTA FL 34231

Mailing Address

6624 GATEWAY AVE
SARASOTA FL 34231

3. Date Incorporated or Qualified

09/07/1995 010866

3a. Date of Last Report

65-0607340

2. Principal Place of Business

21 2813 PROCTOR RD.

Suite, Apt. #, etc.

22 RIVERVIEW PLAZA

City & State

23 SARASOTA FL.

Zip

24 34231

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032

Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

LEWIS, KURT F
6624 GATEWAY AVE
SARASOTA FL 34231

10. Name and Address of New Registered Agent

81 Name

GAMILA S. IBRAHIM

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

2813 PROCTOR RD.

83

RIVERVIEW PLAZA

84 City

SARASOTA

FL

85 Zip Code

34231

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 607.0508, Florida Statutes.

SIGNATURE *Gamil S. Ibrahim* GAMILA S. IBRAHIM

4-16-96

DATE

12. OFFICERS AND DIRECTORS

TITLE LEWIS KURT F. ☒ DELETE
NAME
STREET ADDRESS 6624 GATEWAY AVE
CITY-ST-ZIP SARASOTA FL 34231

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT ☐ Change ☒ Addition
1.2 NAME IBRAHIM M. IBRAHIM
1.3 STREET ADDRESS 2813 PROCTOR RD
1.4 CITY-ST-ZIP SARASOTA, FL 34231

2.1 TITLE VICE PRESIDENT ☐ Change ☒ Addition
2.2 NAME GAMILA S. IBRAHIM
2.3 STREET ADDRESS 2813 PROCTOR RD
2.4 CITY-ST-ZIP SARASOTA FL 34231

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

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

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

6.1 TITLE ☐ Change ☐ Addition
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 607, Florida Statutes; and that my name appears in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE: *Gamil S. Ibrahim* GAMILA S. IBRAHIM 4-16-96 (941)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

FILE NO.

924-1176

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