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

PROFIT CORPORATION ANNUAL REPORT

NAME

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

19	996	DIVISION OF COR	RPORATIO	VS		
DOCUM 1. Corporation N	ENT # P9500	00079176 (0)				
C & J TI	RAVEL, INC.					
Principal Place of	f Business	Mailing Address			i (68)168: 100 ibidi ditil detio adioi i	MIN ABOUT 18419 14141 11411 11414 1141
1611 SE 3RD CT 1611 SE 3RD CT						
DEERFIELD BE	DEERFIELD BEACH FL 334	BEACH FL 33441		3. Date Incorporated or Qualified	3a. Date of Last Report	
					10/09/1995	
2. Principal Plac	e of Business	2a. Mailing Address			4 EST Number	Applied For Not Applicable
21		26			65-061549	\$8.75 Additional
Suite, Apt. #,	etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution 8. This corporation has liability for i	Audeu to rees
Zιp	Country	Zφ	Country		Florida Statutes Yes	∐ No
24	9. Name and Address of Curr	E 0	T		10. Name and Address of New R	egistered Agent
	g, Matthe and Address of Con-		81	Name		
WALKER, CHARLES F			82	Street Add	ress (P.O. Box Number is Not Acceptate	le)
1611 SE 3RD ST			-			
DEERFIELD BEACH FL 33441			83			1-1-2-0-4
			84	1 '		FL 85 Zip Code
	1 1 C+st one 607 O	502 and 607 1508 Florida Statutes.	the above-	named corpo	ration submits this statement for the pu	rpose of changing its registered office
11. Pursuant to or registere	ed agent, or both, in the State of F	lorida. Such change was authorized	by the corp	oration's boa	ration submits this statement for the purify of directors. Thereby accept the app	ointment as registered agont, i am
i	n, and accept the obligations of, a					
SIGNATURE _	Signature, typed or printed name of registered a			int signature requir	ed when rainstating!	DATE FICERS AND DIRECTORS IN 12
12.		AND DIRECTORS DELETE	13.		ADDITIONAL OF INVIOLES TO STA	Change Addition
THILE	D SHALKED CHARKS E		1.2 NAME	\ \		
NAME .	WALKER, CHARLES r		13 STREE	T ADDRESS		
STREET ADDRESS CITY-ST-ZIP	DEERFIELD BEACH FL 33	441	1.4 CITY -	S1-2IP		Change Addition
THEF	D	☐ DELETE	2 1 TITLE	1		C Change C Manney
NAME	WALKER, JANE		22 NAME 23 STREFT ADDR			
STREET ADDRESS	1611 SE 3RD ST		2 4 CITY - \$1 - ZIP			
C(1Y-\$1-ZIP	DEERFIELD BEACH FL 33	DELETE	3 1 1111			Change Addition
TITLE			3.2 NAM			
NAME STREET ADORESS			3 3. STRI	EFT ADDRESS		
CHY-ST-ZIP			3 4 City			Change Addition
TITLE	4		4 1 1014	1		
NAME			4.2 NAM	E ADDRESS		
STREET ADDRESS			4	- ST - ZIP		
CHY-ST-ZIP	-7IP 1		5 1 7111			Change Addition
TITLE NAME			5.2 NAM	16		
STREET ADDRESS			5 3 STR	EET ADDRESS		
CHY-\$1-7IP				r-ST-ZIP		☐ Change ☐ Addition
THILE		DELETE	6 1 111	Lt		

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.

62 NAME

6.3 STREET ADDRESS

6 4 CITY - \$1 - ZIP