

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000079642 (1)

1. Corporation Name

TOURS BY DORON INC.

Principal Place of Business

2916 NW 55TH AVENUE
LAUDERHILL FL 33319

Mailing Address

2916 NW 55TH AVENUE
LAUDERHILL FL 33319

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

2455 E. SUNRISE BLVD

STE 502

FT. LAUDERDALE

FL 33304

3. Date Incorporated or Qualified
10/17/1995

3a. Date of Last Report

4. FEI Number

65-0615089

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

8. Election Campaign Financing
Trust Fund Contribution

\$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

DONENFELD, GLENN L
809 NE 18TH PLACE
FORT LAUDERDALE FL 33305

10. Name and Address of New Registered Agent

81

Name

GERALD S. SCHNITZER

82

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

2455 E. SUNRISE BLVD

83

City

FT. LAUD.

84

State

FL

85

Zip Code

33304

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

Gerald S. Schnitzer

(NOTE: Registered Agent signature required when reinstating)

DATE

12/3/96

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	BRECHNER, ROZ	
STREET ADDRESS	2916 NW 55TH AVENUE	
CITY - ST - ZIP	LAUDERHILL FL 33319	
TITLE	D	DELETE
NAME	DONENFELD, GLENN L	
STREET ADDRESS	809 NE 18TH PLACE	
CITY - ST - ZIP	FORT LAUDERDALE FL 33305	
TITLE	D	DELETE
NAME	VASHDI, DORON	
STREET ADDRESS	911 EAST 82ND STREET	
CITY - ST - ZIP	BROOKLYN NY 11208	
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		Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE	PRESIDENT / D	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
2.2 NAME	DAVID SCHNEIDER	
2.3 STREET ADDRESS	1876 N. UNIV. DR.	
2.4 CITY - ST - ZIP	FT. LAUD. FL 33304-4102	
3.1 TITLE	SECRETARY / D	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
3.2 NAME	GERALD S. SCHNITZER	
3.3 STREET ADDRESS	2455 E. SUNRISE BLVD #502	
3.4 CITY - ST - ZIP	FT. LAUD FL 33304	
4.1 TITLE		Change <input type="checkbox"/> Addition <input type="checkbox"/>
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		Change <input type="checkbox"/> Addition <input type="checkbox"/>
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		Change <input type="checkbox"/> Addition <input type="checkbox"/>
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:

Gerald S. Schnitzer

Secretary

Date

12/3/96

Daytime Phone #

954 564 7701

FILED

96 DEC -4 PM 4:20

SECRETARY OF STATE



REINSTATEMENT

CR2E034 (3/96)