FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 09 1997 8:00am

Secretary of State

asu 564 2701

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000079642 (1)

TOURS BY DORON INC.

Principal Place of Business Mailing Address						83111 53 111 33 111 31	IIIA III PAU ARAAN TARA BUULU		
2916 NW 65TH AVENUE LAUDERHILL FL 33313		2455 E. SUNRISE BLVD. STE. 502 FT. LAUDERDALE FL 33304-3108		A. Data languaged	or Ovellified	Do Date of Last D	<u>-</u>		
					3. Date Incorporated 10/17/1995	or Qualined	3a. Date of Last R 12/04/1996	eport	
2. Principal Pi	lace of Business	2a. Mailing Address			4. FEI Number			plied For	
21		26			65-0615089		No	ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	F1			s Desired	□ \$8.75 /		
City & State		Cilv & State	City & State		C Floating Committee	Cinamata a	Fee Re	<u>-</u>	
23		28		6. Election Campaign Trust Fund Contribution	٠,	\$5.00 Added	, ,		
Zip	Country Zip		Country		8. This corporation ha				
24	25	29	30		Florida Statutes		Yes No		
	9. Name and Address of Current	Registered Agent		641 1	10. Name and Addres	s of New Regis	stered 'Ageni		
	NITZER, GERALD S			81 Name					
2455 E. SUNRISE BLVD. #502				82 Street	Address (P.O. Box Number is I	Not Acceptable	:)		
	: Lauderdale Fl 33304		ŀ	83					
10111	E COULTIDATE TE COUCT								
				84 City			FL 85 Zip	Code	
11. Pursuant 1	to the provisions of Sections 607.0502 egistered agent, or both, in the State	and 607.1508, Florida Stat	utes, the ab	ove-name	d corporation submits this stater	nent for the pur	rpose of changing it	s registered	
agent. La	m familiar with, and accept the obliga	tions of, Section 607.0505, I	lorida Stati	ites.	poration's board of directors. I	пегеру ассери	the appointment as	registered	
SIGNATURE									
12.	Signature, typed or printed name of registered ager OFFICERS AND		OTF: Registered	Agent signatur	a required when rainstating) ADDITIONS/CHANG	רכ זה הרנותר	DATE DIDECTOR	00 101 10	
TITLE	P8.	DELETE	11 11		ADDITIONS/CHANG	ES TO OFFICE	☐ Change	Addition	
NAME	SCHNEIDER DAVID		1.2 NA	ME			•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
STREET ADDRESS	1876 N. DNIV. DR.		1.3 ST	REET ADDRESS					
CITY-ST-ZIP	FT. LAUD FL 33322-4102		1.4 CI	Y - ST - ZIP					
TITLE	SD	DELETE	2.1 117	LF			☐ Change	Addition	
NAME	SCHNITZER, GERALD S		2.2 NA						
STREET ADDRESS	2455 E. SUNRISE BLVD. #502 FT. LAUDERDALE FL 33304			KEET ADDRESS					
CITY-ST-ZIP TITLE	FI. LAUDENDALE FL 33304	DELETE		IY-S1-ZIP	0 5		☐ Change	K Maddian	
NAME			3.1 TIT 3.2 NA		PD BOECH	N314	∟ спапре	Addition	
STREET ADDRESS				MEET ADDRESS	ROZ BRECH 2916 NW 5 LAMBERHIU	- ANE	14E		
CITY-ST-ZIP				IY-S1-ZIP	LAMAGONIU	41_	33313		
TITLE		DELETE	4.3 717		121) 111 22 124 1 12		☐ Change	Addition	
NAME			4.2 N/	ME					
STREET ADDRESS			4.3 ST	REE1 ADDRESS					
CITY-ST-ZIP				Y - \$1 - 7IP					
TITLE		L_I DELETE	5.1 111				Change	Addition	
NAME			5.2 NA						
STREET ADDRESS				REET ADDRESS					
CITY-ST-ZIP TITLE		DELETE	54 CH 61 H	Y-ST-ZIP			☐ Change	Addition	
NAME		o	62 NA				Onlange	E MUVICION	
STREET ADDRESS				REFT ADDRESS					
				a r - Nobili da					

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name