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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000082170 (8)

TIDEWATER TOURS, INC.

Principal	Place	of Bu	usiness

Mailing Address

STE. 301, 315 SE 7TH ST. FT. LAUDERDALE FL 33301 STE. 301. 315 SE 7TH ST. FT. LAUDERDALE FL 33301-3158

## FILED Jul 16 1997 8:00am Secretary of State



3a. Date of Last Report 05/01/1996

3. Date Incorporated or Qualified

10/26/1995

2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For			
21		26	26		NOT APPLICABLE	Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional			
22 27						Fee Required			
City & State City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees				
Zip				Country 8. This corporation has liability for intangible tax under s. 199,032,					
<del></del>			30						
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
LATONA, JOHN				81 Name					
STE. 301, 315 SE 7TH ST. FT. LAUDERDALE FL 33301			92	82 Street Address (P.O. Box Number is Not Acceptable)					
			02	31 Street Address (P.O. Box Number is Not Acceptable)					
			83	<u> </u>					
i			-						
			84	84 City FL 85 Zip Code					
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 register									
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.									
-	m ramisar with, and accept the obliga	mona di, decidit cor .coco, i i	onda otatuto	3.					
SIGNATURE	Signature, typed or printed name of registered ager	nt and tide if applicable (NOT	E Registered Ag	ent signature regulate	ed whon reinstating) DATE				
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12			
TITLE	D	DELETE	1.1 TITLE			Change Addition			
NAME	BEKOFF, ROBERT		1.2 NAME						
STREET ADDRESS 315 SE 7TH ST. #301		1.3 STREET	ADDRESS						
CITY-ST-ZIP	ET LAUDEDDALE EL 20204			ST-ZIP		,			
TITLE	D	☐ DELE1E	2.1 TITLE			Change Addition			
NAME	LATONA, JOHN		2.2 NAME						
STREET ADDRESS	DAR OF STILL OF ANNA		2.3 STREET	ADDRESS					
CITY-ST-ZIP	ET LAUDEDDALE EL 00001			ST-ZIP					
TIFLE	DELETE 3.1 TI					☐ Change ☐ Addition			
NAME			3.2 NAME						
STREET ADDRESS	1		3 3 STREET	ADDRESS					
CITY-S1-ZIP			3.4. CITY-	ST-ZIP					
TITLE		☐ DELE1E	4.1 TITLE			Change Addition			
NAME			4 2 NAME	1					
STREET ADDRESS			4.3 STREET	ADDRESS					
CITY - ST-ZIP			4.4 CITY - S						
TITLE		☐ DELETE	5.1 TITLE			Change Addition			
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREET	ADDRESS					
CITY-ST-ZIP			5.4 CITY - 9	ST - 21P					
TITLE		DELETE	6.1 TITLE			☐ Change ☐ Addition			
NAME			6.2 NAME						
STREET ADDRESS			6.3 STHEET	ADDRESS					
CITY-ST-ZIP			64 CITY - S						
	by certify that the information supplied	with this filing does not quali			in Section 119.07(3)(i), Florida Statutes. I furt	ner certify that the			
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 eath; that I am an officer or director of the copyration 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 all attachment with an address.									
12.03 05/526 0000									