

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 13, 1999 8:00 am  
Secretary of State

04-13-1999 90102 014 \*\*\*150.00

DOCUMENT # P95000088006

1. Corporation Name

VACATIONS USA TOURS, INC.

Principal Place of Business

7601 EAST TREASURE DRIVE, SUITE 1104  
NORTH BAY VILLAGE FL 33141

Mailing Address

7601 EAST TREASURE DRIVE, SUITE 1104  
NORTH BAY VILLAGE FL 33141

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/16/1995

4. FEI Number

65-0625036

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐

Yes

☐

No

2. Principal Place of Business

21 1440 J. F. KENNEDY BLVD

2a. Mailing Address

26 1440 J. F. KENNEDY BLVD

Suite, Apt. #, etc.

22 315

Suite, Apt. #, etc.

27 315

City & State

23 N. BAY VILLAGE, FL.

City & State

28 N BAY VILLAGE FL.

Zip

24 33141

Country

25 USA.

Zip

29 33141

Country

30 USA.

9. Name and Address of Current Registered Agent

MOFFAT, ANA L

3211 PONCE DE LEON BOULEVARD, SUITE 201  
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

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

83

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 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME ARMAYOR, ARTURO  
STREET ADDRESS 7601 EAST TREASURE DRIVE, SUITE 1104  
CITY-ST-ZIP NORTH BAY VILLAGE FL 33141

TITLE VSTD ☒ DELETE

NAME SAIZ, RICARDO A  
STREET ADDRESS 7601 EAST TREASURE DRIVE, SUITE 1104  
CITY-ST-ZIP NORTH BAY VILLAGE FL 33141

TITLE D ☐ DELETE

NAME HADID, CLAUDIA E  
STREET ADDRESS 7601 E TREASURE DR 1104  
CITY-ST-ZIP NORTH BAY VILLAGE FL

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 ☐ Addition

1.2 NAME HADID, EVELYN C. VSTD  
1.3 STREET ADDRESS 7601 E TREASURE DR #1104  
1.4 CITY-ST-ZIP NORTH BAY VILLAGE, FL. 33141

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

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 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

PRESIDENT 4/5/99. 305-861-7606

CR2E034 (11/98)