

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 # P95000091293 (7)

1. Corporation Name

PEOPLE'S VACATION COMPANY



Principal Place of Business

Mailing Address

4540 BOUGAINVILLE DRIVE  
LAUDERDALE BY THE SEA FL 33308

4540 BOUGAINVILLE DRIVE  
LAUDERDALE BY THE SEA FL 33308

2. Principal Place of Business

2a. Mailing Address

21. 800 W OAKLAND PK BLD

26. 800 W. OAKLAND PK BLD

4. FEI Number 65-0623108

3a. Date of Last Report

11/30/1995

NA

Suite, Apt #, etc

Suite, Apt #, etc

Applied For  
Not Applicable

22. SUITE 203

27. SUITE 203

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

City & State

City & State

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

23. FT. LAUDERDALE, FLA

28. FT. LAUDERDALE, FLA

8. This corporation has liability for intangible tax under s. 193.032 Florida Statutes ☒ Yes ☐ No

Zip

Country

Zip

Country

24. 33311

25. USA

29. 33311

30. USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

81. Name ALANA M. DIMON

82. Street Address (P.O. Box Number is Not Acceptable)  
4540 BOUGAINVILLE DR.

83. LAUDERDALE BY THE SEA

84. City FLORIDA

85. Zip Code FL 33308

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 607.0503, Florida Statutes.

SIGNATURE

*Alana M. Dimon, President* (ALANA M. DIMON, PRES.)

Signature of the principal officer or registered agent and, if applicable, (IF NOT Registered Agent signature required when re-registering)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PSTD  
NAME DIMON, ALANA M  
STREET ADDRESS 4540 BOUGAINVILLE DRIVE  
CITY-ST-ZIP LAUDERDALE BY THE SEA FL 33308

11 TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 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:

*Alana M. Dimon, President* ALANA M. DIMON, PRES. 7/29/96 561-1999 (954)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number

CR2E034 (3/96)