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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P9600003343 (6)

AMERICAN VACATIONS, INC.

Principal Place of Business

Mailing Address

FILED Apr 21 1997 8:00am Secretary of State



| 1305 E VINE STREET KISSIMMEE FL 34744 | | | | 1305 E VINE SIMEEI KISSIMMEE FL 34744-3642 | | | | | | | | | | |
|--|--|---|--|---|-------------------------------------|---------------------------------------|---------------------------------|---|-----------------------------------|----------------------------------|-----------------------------|-------------------------|-----|--|
| | | | | | | | | Date Incorporated | or Qualified | 3a. Date o | of Last Re | port | | |
| 2. Principal Place of Business 21 2220 E. IRLO BRONSON | | | | 2a. Mailing Address 26 | | | 4. | FEI Number 7-3356 | 686 | Applied For Not Applicable | | | | |
| Suite, Apt #, etc 22 SUITE #1 | | | | Suite, Apt. #, etc. 27 P. O. Box 450993 | | | | Certificate of State | | SB 75 Additional | | | | |
| City & State 23 KISSIMMEF, FLORIDA | | | | City & State 28 KISSIMMEE, FLORIS | | | i i | Election Campaign Financing Trust Fund Contribution | | | \$5.00 May Be Added to Fees | | | |
| Zip 24 3H74 | | Country 25 U.S.A | Z | ^{Zip} 4745-0993 | Co | U.S.A | II | This corporation h | | intangible tax Yes \ \ | | 199.032, | | |
| | 9. Name | and Address of Cu | | | 15,51 | | 10. | Name and Addre | as of New Re | gistered Age | nt | | | |
| 1309 | DJI, AREZKI 5 E VINE \$1 SIMMEE FL | TREET | | | | 81 Name 82 Street | Address (P. | O. Box Number is | REZKI Not Acceptat | ole) | , | | | |
| NIO | DIMMEE FL | 34744 | | | | 83 | SITE 1 | .TRIO I | SKOM10 | N . | | | | |
| | | 2, | | | | | KISSIM | | | FL | 5 Zip C | 744. | | |
| 11. Pursuarit office or r agent. La | to the provisi registered ag im familiar wil | ions of Sections 607 ent_or both, in the S th, and accept the c | .0502 and 607 State of Florida Ibligations of, S | 7.1508, Florida Statut a. Such change was a Section 607.0505, Flo | es, the a authorize orida Sta | bove-named d by the corp tutes. | d corporation rporation's bo | submits this state oard of directors. | ement for the p I hereby accer | ourpose of cha pt the appoint | anging its ment as r | registered egistered | | |
| SIGNATURE | Signature, typed | or printed name of registers | of agent and little if i | applicable (NOI | E. Register | ed Agent signature | e required when r | reinstating) | | DATE | ···· | | | |
| 12. | , | OFFICERS | AND DIRECT | | 13. | | | DDITIONS/CHAN | GES TO OFFIC | | | | Í | |
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| 14 Ldo horol | his cortify that | t the information our | onlied with this | s filing does not quali | fu for the | evenntion c | stated in Sec | ction 119 07/3\/i\ | Florida Statute | s I further ce | rtify that t | tha . | 1 | |

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 Black 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: