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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

P96000006923 (2)

LUNA TRÁVEL, INC.

Principal Place of Business				
420	LINCOLN	ROAD.	SUITE	360

Mailing Address

420 LINCOLN ROAD, SUITE 360 MIAMI BEACH FL 33139

FILED Apr 29 1998 8:00am Secretary of State



MIAMI BEACH FL 33139 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/23/1996 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0634750 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 KING, CHRISTINE 1529 JEFFERSON AVE Street Address (P.O. Box Number is Not Acceptable) MIAMI BEACH FL 33139 City 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, typind or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) CR2E034 (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE **PSTD** DELETE PRESIDENT Change Addition KING CHRISTING & NAME KING, CHRISTINE E 1.2 NAME SUITE 360 420 LINCOLN RD 420 LINCOLN ROAD, SUITE 360 STREET ADDRESS 1.3 STREET ADDRESS MANI BEACH FL 33139 MIAMI BEACH FL 33139 CITY-ST-ZIF 1 4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE LYNCH, HELENA NAME 2.2 NAME 420 LINCOLN ROAD, SUITE 360 STREET ADDRESS 2.3 STREET ADDRESS MIAMI BEACH FL 33139 CITY-ST-ZIP 2. 4 CITY - ST- ZIP DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change TIT) F Addition 4 1 TITLE 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 8.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-7/P 6.4 City-ST-7IP

14. Thereby 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 ennual 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.

SIGNATURE:

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