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FILED  
Aug 20 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000011193 (5)

1. Corporation Name  
FUNI TRAVEL, INC.

Principal Place of Business

8943 SW 18TH RD  
BOCA RATON FL 33433

Mailing Address

8943 SW 18TH RD  
BOCA RATON FL 33433-7977

3. Date Incorporated or Qualified  
02/06/1996

3a. Date of Last Report  
2/16/96

2. Principal Place of Business

21 8943 SW 18TH RD  
Suite, Apt. #, etc.

22 City & State  
BOCA RATON

24 Zip  
FL

25 Country  
USA

2a. Mailing Address

26 8943 SW 18TH RD  
Suite, Apt. #, etc.

27 City & State  
BOCA RATON FL

29 Zip  
33433

30 Country  
USA

4. FEI Number

65-0634664

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 has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes ☒ No ☐

9. Name and Address of Current Registered Agent

FUNICELLO, DEBRA  
8943 SW 18TH RD  
BOCA RATON FL 33433

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 ☐ DELETE

NAME Debra Funicello  
STREET ADDRESS 8943 SW 18th Rd.  
CITY-ST-ZIP Boca Raton, FL 33433

TITLE ☐ DELETE

NAME Frank Funicello  
STREET ADDRESS 8943 S.W. 18 Rd.  
CITY-ST-ZIP Boca Raton, FL 33433

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 Debra F. Funicello  
1.3 STREET ADDRESS 8943 S.W. 18 Rd.  
1.4 CITY-ST-ZIP Boca Raton, FL 33433

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME Vice President  
2.3 STREET ADDRESS Frank Funicello  
2.4 CITY-ST-ZIP 8943 S.W. 18 Rd.  
Boca Raton, FL 33433

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 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 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 this address.

SIGNATURE

8/15/97 SGL-474845