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FILED
May 19 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000011317 (0)

1. Corporation Name
WORLD TRAVEL REPRESENTATIVES, INC.



Principal Place of Business
7880 WEST FLAGLER STREET
MIAMI FL 33144

Mailing Address
7880 WEST FLAGLER STREET
MIAMI FL 33144

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
02/06/1996

4. FEI Number
65-0639651

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business
21 299 ALHAMBRA CR.

Suite, Apt. #, etc.
22 226

City & State
23 CORAL GABLES, FL

Zip
24 33134

Country
25 USA

2a. Mailing Address
26 299 ALHAMBRA CR.

Suite, Apt. #, etc.
27 226

City & State
28 CORAL GABLES, FL

Zip
29 33134

Country
30 USA

9. Name and Address of Current Registered Agent

CARTAYA, ROSA MA.
7880 W FLAGLER ST
MIAMI FL 33144

10. Name and Address of New Registered Agent

81 Name SANDRA BARSALINI

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

83 STE 226

84 City CORAL GABLES

FL

85 Zip Code 33134

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

SANDRA BARSALINI

4/29/98

Signature, typed or printed name of registered agent and filed applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME PD
CORDOVA, JORGE A
STREET ADDRESS 7880 WEST FLAGLER STREET
CITY-ST-ZIP MIAMI FL 33144 ☐ DELETE

TITLE
NAME VD
REYES, ALICIA
STREET ADDRESS 7880 WEST FLAGLER STREET
CITY-ST-ZIP MIAMI FL 33144 ☒ DELETE

TITLE
NAME VD
CARTAYA, ROSA MA.
STREET ADDRESS 11030 SW 25 STREET
CITY-ST-ZIP MIAMI FL 33165 ☒ DELETE

TITLE
NAME SD
BARSALINI, SANDRA
STREET ADDRESS 7880 WEST FLAGLER STREET
CITY-ST-ZIP MIAMI FL 33144 ☐ DELETE

TITLE
NAME TD
RAMIREZ, MARIA I
STREET ADDRESS 7880 WEST FLAGLER STREET
CITY-ST-ZIP MIAMI FL 33144 ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VD ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 299 ALHAMBRA CR STE 226
1.4 CITY-ST-ZIP CORAL GABLES FL 33134

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE PD ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS 299 ALHAMBRA CR STE 226
4.4 CITY-ST-ZIP CORAL GABLES, FL 33134

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.

SIGNATURE: JORGE CORDOVA 4/29/98 (305) 444-8386

CR2E034 (10/97)