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FILED

May 27 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 # P96000013974 (6)

1. Corporation Name
FLORIDA VACATION PROMOTIONS, INC.

Principal Place of Business

4312 MIDDLEBROOK RD
ORLANDO FL 32811

Mailing Address

4312 MIDDLEBROOK RD
ORLANDO FL 32811-3087



3. Date Incorporated or Qualified

02/12/1996

3a. Date of Last Report

4. FEI Number

59-3384396

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

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

☐

Yes

☐

No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

QUINTINO, ANDREA
4312 MIDDLEBROOK RD
ORLANDO FL 32811

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PS
NAME QUINTINO, ANDREA
STREET ADDRESS 4312 MIDDLEBROOK RD
CITY-ST-ZIP ORLANDO FL 32811
☐ DELETE

1.1 TITLE VPS
1.2 NAME BORIS CAMPOS
1.3 STREET ADDRESS 5325 SPRING RUN AVENUE
1.4 CITY-ST-ZIP ORLANDO, FL 32819
☐ Change ☒ Addition

TITLE V
NAME DAVIS, DON D
STREET ADDRESS 722 MADERIA CT
CITY-ST-ZIP POINCIANA FL 34579
☒ DELETE

2.1 TITLE P
2.2 NAME ANDREA QUINTINO
2.3 STREET ADDRESS 5325 SPRING RUN AVENUE
2.4 CITY-ST-ZIP ORLANDO, FL 32819
☐ Change ☐ Addition

TITLE T
NAME BRANDT, DAVID
STREET ADDRESS 3238 AMACA CIR
CITY-ST-ZIP ORLANDO FL 32837
☒ DELETE

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
☐ Change ☐ Addition

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 an address.

SIGNATURE:

Adrian Quintino
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-1-97

(407)351-5510

Date

Daytime Phone #

CR2E034 (9/96)