

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Feb 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 # P96000031514 (8)

1. Corporation Name

FLORIDA TRAVEL NETWORK MARKETING INC.



Principal Place of Business

Mailing Address

690 ISLAND WAY  
SUITE 608  
CLEARWATER FL 34630

690 ISLAND WAY  
SUITE 608  
CLEARWATER FL 34630

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 645 NORMANDY RD.

2a. Mailing Address

26 645 NORMANDY RD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

23 MADEIRA BEACH FL.

City & State

28 MADEIRA BEACH FL.

Zip

24 33708

Country

25 U.S.A.

Zip

29 33708

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

MINIE, STEVE  
690 ISLAND WAY  
SUITE 608  
CLEARWATER FL 34630

10. Name and Address of New Registered Agent

81 Name

MARY ELLEN MINIE

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

645 NORMANDY RD.

83

84 City

MADEIRA BEACH

FL

85 Zip Code

33708

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

MARY ELLEN MINIE

Mary Ellen Minie

2/11/98

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 D  
NAME MINIE, STEVE G  
STREET ADDRESS 690 ISLAND WAY, #608  
CITY-ST-ZIP CLEARWATER FL 34630

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DIRECTOR/PRESIDENT  
1.2 NAME MARY ELLEN MINIE  
1.3 STREET ADDRESS 645 NORMANDY RD.  
1.4 CITY-ST-ZIP MADEIRA BEACH FL. 33708

Change Addition

Change Addition

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

Change Addition

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

Change Addition

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

Change Addition

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

Change Addition

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

Change Addition

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

Mary Ellen Minie

2/12/98

CR2E034 (10/97)