

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Jun 10 1997 8:00am
Secretary of State

DOCUMENT # P96000047982 (9)

1. Corporation Name
TOURS, TOURS, TOURS, INC.



Principal Place of Business
5034 LAKE VALENCIA BLVD., E.
PALM HARBOR FL 34684

Mailing Address
5034 LAKE VALENCIA BLVD., E.
PALM HARBOR FL 34684-4009

3. Date Incorporated or Qualified
05/31/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 1272 Abbey Crescent Ln
Suite, Apt. #, etc.

26 1272 Abbey Crescent Ln
Suite, Apt. #, etc.

4. FEI Number

Applied For

59-3387814

Not Applicable

22

City & State

27

City & State

23 Clearwater FL
Zip Country

28 Clearwater FL
Zip Country

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

24 33759

25 Pinellas

29 33759

30 Pinellas

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WENDT, ROBERT J
5034 LAKE VALENCIA BLVD., E.
PALM HARBOR FL 34684

81 Name

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

1272 Abbey Crescent Lane

83

84 City

Clearwater

FL

85 Zip Code
33759

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 Robert J. Wendt

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/29/97

DATE

12. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME WENDT, ROBERT J
STREET ADDRESS 5034 LAKE VALENCIA BLVD., E.
CITY-ST-ZIP PALM HARBOR FL 34684

TITLE ST ☐ DELETE

NAME WENDT, JEAN
STREET ADDRESS 5034 LAKE VALENCIA BLVD., E.
CITY-ST-ZIP PALM HARBOR FL 34684

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
1.3 STREET ADDRESS 1272 Abbey Crescent Lane
1.4 CITY-ST-ZIP Clearwater FL 33759

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 1272 Abbey Crescent Lane
2.4 CITY-ST-ZIP Clearwater FL 33759

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 an address.

SIGNATURE: Robert J. Wendt

4/29/97 (912) 244-3646

CR2E034 (9/96)