Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

□No

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000058134

1. Corporation Name

Suite, Apt. #, etc.

City & State

21

22

23

24

CLUB TOUR, INC.

Principal Place of Business	Mailing Address
5713 RIDGE CLUB LOOP SUITE 201 ORLANDO FL 32839	5713 RIDGE CLUB LOOF SUITE 201 ORLANDO FL 32839
2. Principal Place of Business	2a. Mailing Address

28 Country Zip Country 30 25 29

9. Name and Address of Current Registered Agent

26

27

Suite, Apt. #, etc.

City & State

FILED May 01, 1999 8:00 am Secretary of State

05-01-1999 90027 012 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

5. Certificate of Status Desired

Trust Fund Contribution

Personal Property Tax.

Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

07/08/1996 4. FEI Number

59-3387399

S713 RIDGE CLUB LOOP SUITE 201 ORLANDO FL 32839 82 Street Address (P.O. Box Number is Not Acceptable) 83 34 City FL 85 Zip Code 1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the sale 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, 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, hyseld or presed name of registered agent and site of spiritable. SIGNATURE Signature, hyseld or presed name of registered agent and site of spiritable. SIGNATURE Signature, hyseld or presed name of registered agent and site of spiritable. SIGNATURE Signature, hyseld or presed name of registered agent and site of spiritable. SIGNATURE Signature, hyseld or presed name of registered agent and site of spiritable. SIGNATURE Signature, hyseld or presed name of registered agent and site of spiritable. SIGNATURE Signature, hyseld or presed name of registered agent and site of spiritable. SIGNATURE Signature, hyseld or presed name of registered agent and site of spiritable. SIGNATURE Signature, hyseld or presed name of registered agent and site of spiritable. SIGNATURE Signature, hyseld or presed name of registered agent and site of spiritable. SIGNATURE Signature, hyseld or presed name of registered agent and site of spiritable. SIGNATURE Signature, hyseld or presed name of registered agent and site of Florida. Statutes, the corporation's board of directors. I hereby accept the appointment as registered directors. I hereby accept the appointment as r					Name				
SUITE 201 ORLANDO FL 32839 84 City FL 85 Zip Code 1. 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 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, and mailiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the obligations of, Section 607.0505, Florida Statutes. 1. Purpose of the purpose of changing its registered agent, and state appointment as registered agent, and state appointment appointment as registered agent, and state appointment as registered agent, and state appointment as registered agent, and state appointment ag	V. 14 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			82	Street	eet Address (P.O. Box Number is Not Acceptable)			
ORLANDO FL 32839 46 City FL 85 Zip Code 1. Pursuant to the provisions of Sections 607 0502 and 507.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I heraby accept the appointment as registered agent. It am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, hyped or printed nume of registered agent and title of epictable. 2. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 THE PTD DELETE 1.1THE DELETE 1.1THE DELETE 1.2 NAME DE OLIVEIRA, CESAR A 1.2 NAME ST13 RIDGE CLUB LOOP APT 201 1.3 STREET ADDRESS 1.4 City'-S1-ZP THE VSD DILETE 2.1 THLE DELETE 2.2 NAME OLIVEIRA, EDUARDO H 2.2 NAME S13 STREET ADDRESS 5713 RIDGE CLUB LOOP APT 201 2.3 STREET ADDRESS 5713 RIDGE CLUB LOOP APT 201 2.3 STREET ADDRESS 5713 RIDGE CLUB LOOP APT 201 2.3 STREET ADDRESS 5713 RIDGE CLUB LOOP APT 201 2.3 STREET ADDRESS 5713 RIDGE CLUB LOOP APT 201 2.3 STREET ADDRESS 1.3 STREET ADD				83		<u> </u>			
1. 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 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, and accept the obligations of, Section 607.0505, Florida Statutes. In a familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. In a familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. In a familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. In a familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. In a familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, board of directors. I hereby accept the appointment as registered agent									
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 ingistered agent and this if applicable. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. THE DE OLIVEIRA, CESAR A TREETADORESS AS 7513 RIDGE CLUB LOOP APT 201 ORLANDO FL 32839 TREE VSD OLIVEIRA, EDUARDO H TREETADORESS AS 11 TITLE OLIVEIRA, EDUARDO H 5713 RIDGE CLUB LOOP APT 201 ORLANDO FL 32839 TREE STATE CHANGES TREETADORESS AS 11 TITLE ORLANDO FL 32839 TREE ADDRESS AS 11 TITLE ORLANDO FL 32839 TREETADORESS AS 11 TITLE ORLANDO FL 32839 TREETAD	OTENTA O TE GEGGG			84	City	FL	85 Zip	Code	
Signature, lysed or printed name of registered agent and title if applicable. 2	office or re	egistered agent, or both, in the State of Florida. Su	ch change was auth	orized by	the corp	corporation submits this statement for the purpose of oration's board of directors. I hereby accept the appoint	changing its itment as re	registered egistered	
2.	SIGNATURE					DATE			
TILE PTD DELETE 1.1 TITLE Change Addition MAKE DE OLIVEIRA, CESAR A 1.2 NAME 1.3 STREET ADDRESS TY-ST-ZIP VSD DELETE 2.1 TITLE Change Addition MAKE OLIVEIRA, EDUARDO H 2.2 NAME ST13 RIDGE CLUB LOOP APT 201 2.3 STREET ADDRESS ORLANDO FL 32839 DELETE 2.1 TITLE Change Addition MAKE OLIVEIRA, EDUARDO H 2.3 STREET ADDRESS ORLANDO FL 32839 DELETE 3.1 TITLE Change Addition MAKE ST13 RIDGE CLUB LOOP APT 201 2.3 STREET ADDRESS ORLANDO FL 32839 DELETE Change Addition MAKE STREET ADDRESS 3.4 CITY-ST-ZIP TILE DELETE DELETE Change Addition MAKE MERCHADORESS A CITY-ST-ZIP TILE DELETE S.1 TITLE Change Addition MAKE STREET ADDRESS TY-ST-ZIP Change Addition MAKE S.2 NAME S.3 STREET ADDRESS TY-ST-ZIP Change Addition MAKE S.3 STREET ADDRESS TY-ST-ZIP Change Addition MAKE S.3 STREET ADDRESS TY-ST-ZIP Change Addition AME S.3 STREET ADDRESS TY-ST-ZIP Change Addition AME ANAE CHANGE CHANGE MAKE A CITY-ST-ZIP TILE CHANGE Addition AME CHANGE					it signature	equitod tirent romodulity/	D DIRECTO	DRS IN 12	
DE OLIVEIRA, CESAR A 5713 RIDGE CLUB LOOP APT 201 ORLANDO FL 32839 TIV. ST. ZIP TILE VSD OLIVEIRA, EDUARDO H TREET ADDRESS TIV. ST. ZIP TILE ORLANDO FL 32839 DELETE 21 TILE 22 NAME 32 STREET ADDRESS TIV. ST. ZIP TILE AME AME TREET ADDRESS TIV. ST. ZIP TILE AME AME TREET ADDRESS TIV. ST. ZIP DELETE AME AME TREET ADDRESS TIV. ST. ZIP TILE AME TREET ADDRESS TIV. ST. ZIP TILE AME TREET ADDRESS TIV. ST. ZIP TILE AME TREET ADDRESS TIV. ST. ZIP TILE AME TREET ADDRESS TIV. ST. ZIP TILE AME TREET ADDRESS TIV. ST. ZIP TILE AME TREET ADDRESS TIV. ST. ZIP TILE AME TREET ADDRESS TIV. ST. ZIP TILE AME TREET ADDRESS TIV. ST. ZIP TILE AME TREET ADDRESS TIV. ST. ZIP TILE AME TREET ADDRESS TIV. ST. ZIP TILE AME TREET ADDRESS TIV. ST. ZIP TILE AME TREET ADDRESS TIV. ST. ZIP TILE AME TREET ADDRESS TIV. ST. ZIP TILE TILE TILE TILE TILE TILE TILE TILE	12.					T ADDITIONS/G/IANGES TO GITTOENG AN		_	
1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 1.4 STREET ADDRESS 1.4 CITY-ST-ZIP 1.4 STR		,							
TY-ST-ZP	NAME								
TLE	STREET ADDRESS								
AME OLIVEIRA, EDUARDO H TREET ADDRESS 5713 RIDGE CLUB LOOP APT 201 22 NAME TITLE ORLANDO FL 32839 DELETE 3.1 TITLE AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TY-ST-ZIP TLE AME TREET ADDRESS TREET ADDRESS TREET ADDRESS TREET ADDRESS TREET ADDRESS TREET ADDRESS TRY-ST-ZIP TLE AME TREET ADDRESS TRY-ST-ZIP TRY-ST-ZIP TRY-ST-ZIP TRY-ST-ZIP TREET ADDRESS TRY-ST-ZIP TRY-ST-ZI	CITY-ST-ZIP				r-ZIP		Change	☐ Addition	
TREET ADDRESS 5713 RIDGE CLUB LOOP APT 201 23 STREET ADDRESS 24 CITY-ST-ZIP	TITLE		☐ DELETE	2.1 TITLE			☐ Change	[_] Addition	
TITLE DELETE DELETE	NAME	OLIVEIRA, EDUARDO H		2.2 NAME					
DELETE	STREET ADDRESS	5713 RIDGE CLUB LOOP APT 201		2.3 STREET	ADDRESS				
AME	CITY-ST-ZIP	ORLANDO FL 32839		2. 4 CITY-S	T-ZIP				
3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 3.4. CITY-ST-ZIP	TITLE		☐ DELETE	3.1 TITLE			☐ Change	☐ Addition	
34. CITY-ST-ZIP 34. CITY-ST-ZIP	NAME			3.2 NAME	_		-		
DELETE	STREET ADDRESS			3.3 STREET	ADDRESS				
AME 4. 2 NAME 5. 1 TITLE 5. 1 TITLE 5. 2 NAME 5. 2 NAME 5. 3 STREET ADDRESS 1TY-ST-ZIP TITLE 5. 1 TITLE 5. 1 TITLE 5. 1 TITLE 5. 1 TITLE 5. 2 NAME 5. 3 STREET ADDRESS 5. 3 STREET ADDRESS 5. 4 CITY-ST-ZIP TITLE AME 6. 1 TITLE 6. 1 TITLE 6. 2 NAME 6. 2 NAME 6. 2 NAME	CITY-ST-ZIP			3.4. CITY-S	T-ZIP				
A3 STREET ADDRESS	TITLE		☐ DELETE	4.1 TITLE			☐ Change	☐ Addition	
A CITY-ST-ZIP	NAME			4. 2 NAME					
DELETE	STREET ADDRESS			4.3 STREET	ADDRESS				
DELETE	}			4.4 CITY-S	r-ZIP				
### 5.3 STREET ADDRESS	TITLE		☐ DELETE				Change	Addition	
	NAME			5.2 NAME					
	ļ			5.3 STREET	ADDRESS				
TLE G.1 TITLE G.1 TITLE G.2 NAME AME C.4 CYTEST ADDRESS	ļ			5.4 C(TY-S)	T-ZIP				
62 NAME			DELETE	6.1 TITLE			☐ Change	☐ Addition	
CA CTOFFET ADDRESS				6.2 NAME			•	_	
	· · · · · · · · · · · · · · · · · · ·			6.3 STREET	[ADDRESS				
CACITY OF TIP	STREET ADDRESS								
TY-ST-ZIP 4. 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	CITY-ST-ZIP	of at the terms of a second of the second of			_	d in Continu 410.07/3\(ii) Florida Statutos 5 wher con	tifu that the	information	

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 withan address, with all other like empowered.

SIGNATURE: