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FILED

Apr 25 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 # P96000072702 (9)

1. Corporation Name  
TRAVEL FAIR, INC.

Principal Place of Business  
1700 N.W. FEDERAL HWY.  
STUART FL 34994

Mailing Address  
1700 N.W. FEDERAL HWY.  
STUART FL 34994-9632



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

08/28/1996

3a. Date of Last Report

4. FEI Number

65-0691939

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

Yes No

9. Name and Address of Current Registered Agent

GRAHAM, MICHAEL  
5700 LAKE WORTH RD.  
SUITE 208  
LAKE WORTH FL 33463

10. Name and Address of New Registered Agent

81 Name

LORI Speciale

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

527 SE CLIFF Rd

83

84 City

Pt. St. Lucie

FL

85 Zip Code

34984

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

Lori Speciale Lori Speciale-VP

4-17-97

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 P  
NAME SPECIALE, VINCENT  
STREET ADDRESS 1700 N.W. FEDERAL HWY.  
CITY-ST-ZIP STUART FL 34994

DELETE

TITLE VP  
NAME SPECIALE, LORI  
STREET ADDRESS 1700 N.W. FEDERAL HWY.  
CITY-ST-ZIP STUART FL 34994

DELETE

TITLE S  
NAME SPECIALE, RICHARD  
STREET ADDRESS 1700 N.W. FEDERAL HWY.  
CITY-ST-ZIP STUART FL 34994

DELETE

TITLE T  
NAME SPECIALE, RICHARD  
STREET ADDRESS 1700 N.W. FEDERAL HWY.  
CITY-ST-ZIP STUART FL 34994

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  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

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 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: Lori Speciale Lori Speciale

4-17-97 561-692-0092

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)