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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

P96000076756 (1)

DUR TRAVEL, INC.

Mailing Address

2200 N. FLORIDA MANGO ROAD 2ND FLOOR W. PALM BEACH FL 33409 2200 N. FLORIDA MANGO ROAD 2ND FLOOR W. PALM BEACH FL 33409 **FILED**

Apr 27 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

				09/11/1996	
2. Principal Place	e of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0708403	Not Applicable
Suite, Apt. #, etc. 22		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State				6. Election Campaign Financing	\$5.00 May Be
23 28				Trust Fund Contribution	Added to Fees
Z _i ρ	Country	Zip	Country	8. This corporation owes or has paid the c	urrent year Intangible
24	25	29	30	Personal Property Tax due June 30.	Yes No
	g. Name and Address of Curren	nt Registered Agent		10. Name and Address of New Registered	d Agent
SLAVIN, MICHAEL FIRST UNION CENTER 4440 PGA BLVD., STE. 402 PALM BEACH GARDENS FL 33410			81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83		
, , , ,	DENOTI GATELITO 1 E 60410	•	84 City	F	85 Zip Code
agent. I am f	he provisions of Sections 607.050 stered agent, or both, in the State amiliar with, and accept the obliga-	2 and 607.1508, Florida Statute of Florida. Such change was at alions of, Section 607.0505, Flor	s, the above-named couthorized by the corporida Statutes.	orporation submits this statement for the purpose ration's board of directors. I hereby accept the ap	
SIGNATURE	nature, typed or printed name of registered age	ent and title if applicable (NOTE	Registered Agent signature rea	quired when reinstating) DATE	
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TOTLE	20	Change Addition
	DURR, NICOLE 2200 NORTH FLORIDA MANG	CO DOAD AND ELOOD	1.2 NAME TOT	PS JRR, NICOLE	
	WEST PALM BEACH FL 3340		1.3 STREET ADDRESS 10	016 No. Dixie Hwy, Ste 1	
TITLE		DELETE	2.1 TITLE	est Palm Beach, FL 33401	Change Addition
NAME			22 NAME T		
STREET ADDRESS			2.3 STREET ADDRESS BI	ELSKI, KAREN	
City-St-ZIP			2.4 CITY-ST-ZIP	16 No. Dixie Hwy, Ste 1	
TITLE		DELETE	3.1 TITLE	est Palm Beach, FL 33401	Change Addition
NAME			3.2 NAME	-	-
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		· ·
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4, 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 City-St-ZiP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
1					
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
		□ bittir			Tollando Tivoquali
NAME			6.2 NAME		
OTDEET ANNOUSS I			6 2 STREET ADDRESS		j

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 angular 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 employers 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 appear out with an address.

SIGNATURE:

CITY - ST - ZIP

4/20/98 54 686 7757