FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

FILED
May 01 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 # P96000081387 (8)

1. Corporation Name
EXECUTIVE TOURS, INC.

Principal Place of Business	Mailing Address
1567 S.W. ABINGDON AVENUE PORT ST. LUCIE FL 34953	1567 S.W. ABINGDON AVENUE PORT ST. LUCIE FL 34953-2551

2. Principal Place of Business	2a. Mailing Address
21 1567 S.W. ABINGDON	26 P.O. BOX 7668
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 PORT ST. LUCIE FL 34953	27 PORT ST. LUCIE
City & State	City & State
23 FLORIDA	28 FLORIDA
Zip / Country	Zip / Country
24 34953 / 25 USA	29 34985 / 30 USA

3. Date Incorporated or Qualified: 09/30/1996
3a. Date of Last Report:
4. FEI Number: 65-0702619 ☐ 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	10. Name and Address of New Registered Agent
FINDLAY, RENNIE J 1567 S.W. ABINGDON AVENUE PORT ST. LUCIE FL 34953	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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: x RENNIE J FINDLAY - President (Signature, typed or printed name of registered agent and title if applicable) Rennie J. Findlay (NOTE: Registered Agent signature required when reinstating) DATE: 4-24-97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	FINDLAY, RENNIE J	1.2 NAME	
STREET ADDRESS	1567 S.W. ABINGDON AVENUE	1.3 STREET ADDRESS	
CITY-ST-ZIP	PORT ST. LUCIE FL 34953	1.4 CITY-ST-ZIP	
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ 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	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E034 (9/96)

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: x RENNIE J FINDLAY - President 561-878-9586