2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000084043

FILED
00 AUG 11 AM 11:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Entity Name

SS TOURS, INC.

Principal Place of Business	Mailing Address
3741 SPEAR POINT DRIVE ORLANDO FL 32837	3741 SPEAR POINT DRIVE ORLANDO FL 32837-5802

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
14549 OCONEE LANE	14549 OCONEE LANE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ORLANDO, FL	City & State: ORLANDO, FL
Zip: 32837 Country: USA	Zip: 32837 Country: USA

4. FEI Number 59-3408724 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

STEGER, FREDERICK
3741 SPEAR POINT DR.
ORLANDO FL 32837

7. Name and Address of New Registered Agent

Name: ROGERIO MAGALHAES

Street Address (P.O. Box Number is Not Acceptable): 14549 OCONEE LANE

City: Orlando FL Zip Code: 32837

8. The above named entity submits this statement for the purpos[illegible] registered office or registered agent, or both, in the State of Florida.

SIGNATURE _____ 07/05/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STEGER, FREDERICK 3741 SPEAR POINT DRIVE ORLANDO FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ODETTE LORENCO PEDRAOSamaha 14549 Oconee Lane Orlando FL 32837	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ODETTE LORENÇO PEDRÃO SAMAHA 14549 OCONEE LANE ORLANDO, FL 32837 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	05-23-2000 94829 — 155.75 ☐ Change ☐ Addition

CR2E034 (5/99)

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [illegible] ROGERIO MAGALHAES Odette L Samaha 04/25/00 (407) 466-3434
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #