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

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9600085073 (0)

NATIONAL INTERNET TRAVEL COMPANY

Principal Place of Business

Mailing Address

## **FILED** Feb 06 1997 8:00am Secretary of State



777 SOUTH FLAGLER DRIVE SUITE 310 EAST WEST PALM BEACH FL 33401		777 SOUTH FLAGLER DRIVE SUITE 310 EAST WEST PALM BEACH FL 33401-6161			3. Date Incorporated or Qualified 3a. Date of Last Report 10/15/1996
2. Principal Pl	acc of Business	2a. Mailing Address	·····		4. FFI Number
21		26			65-0718356 Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required
City & State 23		City & State	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip <b>24</b>	Country 25	Zip 29	Count	у	8. This corporation has fiablity 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					
DILOMAN, HOTAND				Name	
777 SOUTH FLAGLER DRIVE SUITE 310 EAST			8		Address (P.O. Box Number is Not Acceptable)
WES	ST PALM BEACH FL 33401		8:	3	
			8	City	FL 85 Zip Code
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  Signature, typed or proved rate of the estered agent and title if applicable. (NOTE. Registered Agent signature required when reinstating)  DATE					
12.		ID DIRECTORS	13.	gent signature	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	O FIGERO AN	DELETE	1.1 TITLE		D/P Change Addition
NAME		<del></del>	1.2 NAM		Carl B. Marbach
STREET ADDRESS			1.3 STRE	T ADDRESS	5455 N. Federal Highway, Suite O
CHTY-ST-ZIF					Boca Raton FL 33487
THTLE			2.1 TITLE		D/V Change Addition
NAME			0.000000		William H. Marbach
STREET ADDRESS			2.3 STRE		5455 North Federal Highway, Suite O
CITY-ST-ZI₽			2. 4 CITY	DT TIO	Boga Raton FL 33487
Title .	☐ DELETE		3.1 TITLE		D/S/T Change Addition
NAME			3.2 NAMI		Edward D. Silver
STREET ADDRESS				T ADDRESS	5455 North Federal Highway, SuiteO
CITY-ST-ZIP	DELETE		3.4. CITY 4.1 TITLE		Boca Raton FL 33487 Change Addition
TITLE NAME		☐ otreit	4.1 THE		C Ombinde
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP			4.3 SINC		
TITLE					Change Addition
NAME			5.1 TITLE 5.2 NAMI		
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP			5.4 CITY		
THILE	[] DELETE		6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAMI		
STREET ADDRESS			6.3 STRE	T ADDRESS	
CITY-ST-ZIP			6.4 CITY	ST-ZIP	

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 prangisd, or on an attachment with an address.

SIGNATURE: