FILE NOW: FILING FEE AFTER MAY 1 IS $550.00 Amende

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Aug 19 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 # P96000103222 (1)

1. Corporation Name

INNOVATIONS IN TRAVEL, INC., dba TOURS BY CHARLIE

Principal Place of Business	Mailing Address
2750 N. 29th Ave., Ste 124 Hollywood, FL 33020	2750 N. 29 Ave.,Ste 124 Hollywood, Fl 33020-1516

Amended

3. Date Incorporated or Qualified	3a. Date of Last Report
12/24/96	12/26/96

2. Principal Place of Business — 21 / Suite, Apt. #, etc — 22 / City & State — 23 / Zip — 24 / Country — 25

2a. Mailing Address — 26 / Suite, Apt. #, etc. — 27 / City & State — 28 / Zip — 29 / Country — 30

4. FEI Number: 65-0714723 — 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
SPIERER, CHARLES 2750 N. 29th Ave., Ste. 124 Hollywood, FL. 33020	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 607.1508, 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 CHARLES SPIERER [signature] 7/31/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President	☒ DELETE	1.1 TITLE	PRESIDENT ☐ Change ☒ Addition
NAME	APPEL, ARTHUR		1.2 NAME	SPIERER, CHARLES
STREET ADDRESS	10824 Richmond PL.		1.3 STREET ADDRESS	3900 N. HILLS DRIVE # 120
CITY-ST-ZIP	Cooper City FL. 33026		1.4 CITY-ST-ZIP	HOLLYWOOD, FL. 33021
TITLE	Secretary	☒ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	MARGOLIN, ERIC		2.2 NAME	
STREET ADDRESS	105 THORNTON DR.		2.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BEACH GARDENS FL 33418		2.4 CITY-ST-ZIP	
TITLE	Treasurer	☒ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	GOLDSTEIN, STEPHEN M.		3.2 NAME	
STREET ADDRESS	6 HILLMAN RD.		3.3 STREET ADDRESS	
CITY-ST-ZIP	NEW CITY NY 10956		3.4 CITY-ST-ZIP	
TITLE	Vice President	☒ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	FREEDMAN, DAVID A.		4.2 NAME	
STREET ADDRESS	1 HILLMAN RD.		4.3 STREET ADDRESS	
CITY-ST-ZIP	NEW CITY NY 10956		4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	PE 8.19
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	500002273935
STREET ADDRESS			6.3 STREET ADDRESS	-08/21/97--01002--017
CITY-ST-ZIP			6.4 CITY-ST-ZIP	***61.25

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: [signature] President 7/15/97 954-920-8207
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #