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

PROFIT CORPORATION ANNUAL REPORT 1000



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED
Apr 22 1998 8:00am
Secretary of State

J	1990	SOUNT SE												
DOCU 1. Corporation	MENT #	P 970	000	51388 C										
LAND &	SEA TRAVE	L DISTRIBU	TORS	s, inc.										
Principal Plac	e of Business		Ma	iling Address										
RO1 NW	፣ ለንጥሀ ለህፑ :	#120 U		SAME										
801 NW 47TH AVE #120 W MIAMI, FL 33126				SAME					DO NOT WRITE IN THIS SPACE					
	, , , , , , , , , , , , , , , , , , , ,						j		orated or Qualifie				7	
9 Oringinal O	Place of Pusiness		L On Mail Address						FEBRUA 4. FEI Number	RY 12, 19	97			4
	ipal Place of Business NW 47TH AVE			26 801 NW 47TH AVE					65-0729454				pplied For lot Applicable	1
Suite, Apt. #, etc.			Suite. Apt. #, etc.							Status Desired			Additional	1
22 #120 W			27 120 W						5. Certificate o	i Status Desired		Fee F	Required]
City & Stat			- 1	City & State MIAMI,	FL				Election Can Trust Fund C	npaign Financing			May Be to Fees	
Zip		untry	28	Zip		untry	;			ition owes or has				1
24 33126	25	DADE	29	33126	30 I	AD	E		-	perty l'ax due Ju	•		X No	
	9. Name and Ad	Idress of Current	Registe	ered Agent					10. Name and	Address of New I	Registered	Agent		7
WILKIN	ISON SEJOUR					81	Name	CH	ARLES R.	CUMMINS				
	BISCAYNE B	LVD #138				82	Street A	Addres	I NW 47TH	per is Not Accept	able)			
MIAMI,	FL 33181					83			20 W					1
	(84	City	# L	20 W			Tarl 7in	Code	┨
L						04	City	MI	AMI		FL	_ 85 33	Code L 26	
11. Pursuant office or r	to the provisions of S registered agent, or b im fair liar with and	Sections 607.0502 a	and 60. Florida	7.1508, Florida Statu Such change was	ites, the a	bove d by	e-named c	corpora	ation submits this	statement for the	purpose o	of changing	its registered	1
agent. I a	in tamiliar with and	accept the obligation	ons of.	Section 607.0505, F									9.010	
SIGNATURE	Signature Typed or printed		and the d	upp#caule (NC	CHAR]	LES ed Age	R. C	CUMM required	IINS when reinstating)	APRI	L 14	1998		١,
12.		OFFICERS AND		ORS	13.				ADDITIONS/C	HANGES TO OF	ICERS AN	D DIRECTO	RS IN 12	֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓
TITLE	PRESIDENT			DEL ETE	1.11	ITLE IAME						☐ Change	☐ Addition	3
NAME	CHARLES R. CUMMINS			10. 11										3
STREET ADDRESS CITY-ST-ZIP	ss 801 NW 47TH AVE #12 MIAMI, FL 33126			O W			ADDRESS 1 - ZIP							Ì
TITLE	MIAMIL FL	33120		DELETE	211		1-24					☐ Change	☐ Addition	1 8
NAME					221	IAME								
STREET ADDRESS	}				235	TREE1	ADDRESS							1
CITY-ST-ZIP							T-ZIP							1
TITLE				☐ DELETÉ	317							LI Change	Addition	
NAME Street address					32 N		ADDRESS							}
CITY-ST-ZIP						CITY-S	1							
TITLE				DELETE	4.1 T							Change	☐ Addition	1
NAME					4.21	NAME	}							
STREET ADDRESS					4.3 S	TREET	ADDRESS							1
CITY-ST-ZIP				DELETE		IIY-S	T - 7 1P			ور واحدار واحدار واحدار		d d oesa	- Caute -	-
TITLE NAME				P DETEIE	5.1 T 5.2 N					00024	- 515 -	Train Compage	☐ Addition	
STREET ADDRESS							ADDRESS		一リサ/ 3:33 1	/22/980; 50.00	1012	นรร		-
CITY-ST-ZIP	·					HTY-S			ጥጥ∙ 1	لياليا وليانيه				
TITLE				☐ DELETE	6.1 T							Change	☐ Addition	1
NAME							(سدال استان	
, , , , , , , , , , , , , , , , , , ,					6.2 N	IAME	1					4.0	ムル	
STREET ADDRESS							ADDRESS					00	412	

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 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 chapted, or on an attachment with an address

CHARLES R. CUMMINS APRIL 14,1998
OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Dat

305-774-6686 Daylitic Phone K