P97000015795

F	Lequestor's Name	
NATCO 13555 A Sucr 54	WOMORICE BLUD O Dr. PL 33762	Office Use Only
1. (76	27)	BER(S), (if known):
2(Co	rporation Name)	(Document #)
4	rporation Name) rporation Name)	(Document #) (Document #) (Document #)
-	Pick up time Will wait Photoc	Certified Copy
NEW FILINGS	AMENDMENTS Amendment	1000028910718 -06/01/9901109002 ******35.00 ******35.00
NonProfit Limited Liability Domestication	Resignation of R.A., Office Change of Registered Agen Dissolution/Withdrawal	
Other OTHER FILINGS	Merger REGISTRATION/	
Annual Report Fictitious Name Name Reservation	Foreign Limited Partnership	- CANS
TVAILE RESELVATION	Reinstatement Trademark Other	

CR2E031(1/95)

Examiner's Initials



ROYCE C. HADDAD, JR. ROBERT J. SHUTTERA

Ulmerton Business Center 13555 Automobile Blvd • Suite 540 Clearwater, FL 33762-3838

> Telephone (727) 299-0449 Facsimile (727) 299-9181

www.flapersonalinjury.com

A Professional Association Clearwater St. Petersburg Bradenton Tampa

June 24, 1999

Florida Department of State **Division of Corporations** PO Box 6327 Tallahassee, FL 32314

Re:

North American Travel Company P97000015795

To Whom It May Concern:

Enclosed is a Statement of Change of R.A. for North American Travel Company.

In response to your letter dated June 10, 1999, Number 699A00031429, please change the address for North American Travel Company to the following:

> 13555 Automobile Blvd., Ste. 540 Clearwater, FL 33762

If anything further is needed please contact me at the above number and address.

Sincerely

Royce C. Haddad Jr



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 10, 1999

NATCO SUITE 540 13555 AUTOMOBILE BOULEVARD CLEARWATER, FL 33762

SUBJECT: NORTH AMERICAN TRAVEL COMPANY

Ref. Number: P97000015795

99 JUN 28 PM 12: 09

We have received your document for NORTH AMERICAN TRAVEL COMPANY and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

THE MAILING ADDRESS IS DIFFERENT THAN WHAT WE HAVE ON FILE. IF YOU WOULD LIKE ME TO CHANGE THE ADDRESS, PLEASE STATE SO IN A COVER LETTER.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6957.

Doug Spitler Document Specialist

Letter Number: 699A00031429

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,
the undersigned corporation organized under the laws of the State of
submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation is: North American Travel (ompany
2. The mailing address of the corporation is: 13355 Awamobile Blvd Ste 540
Chearmater, FC 33762
3. Date of incorporation/qualification: 2/19/97 Document number: P970000/579
4. The name and address of the current registered agent and office:
Roxce C. Haddbel Tr
360 central tue, ste 1490 =
St-Reference, FL 33701 Es &
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)
Royce C. Haddad, TT
13555 Automobile Blud, Ste 540
Charuber, FC 33762
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.
Signature of an officer, chairman or vide chairman of the board) May 1, 1999 (Date)
HELEN N. HADDAD CHAIRMAN (Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent
1/0/1/00/1/00/1/05/1/199
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *
TALLITO PELL \$35.00

CR2E045(7/97)