

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 25, 2002 8:00 am
Secretary of State

02-25-2002 90068 027 ***150.00

DOCUMENT # P97000018057

1. Entity Name
BRENNAN'S TRAVEL, INC.

Principal Place of Business

**2929 SW 3RD AVE.
MIAMI FL 33129**

Mailing Address

**2929 SW 3RD AVE.
MIAMI FL 33129**

2. Principal Place of Business

2200 BISCAYNE BLVD.

Suite, Apt. #, etc.

323

3. Mailing Address

2200 BISCAYNE BLVD.

Suite, Apt. #, etc.

323

City & State

MIAMI FL

City & State

MIAMI FL

4. FEI Number

59-2679169

Applied For

Not Applicable

Zip

33137

Country

Zip

33137

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GAMBOA, MIGUEL
2929 SW 3RD AVE.
MIAMI FL 33129**

7. Name and Address of New Registered Agent

Name

GAMBOA, MIGUEL

Street Address (P.O. Box Number is Not Acceptable)

2200 BISCAYNE BLVD.

SUITE #323

City

MIAMI

FL

Zip Code
33137

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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, 2002 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

TITLE **VPST** ☐ Delete
NAME **GAMBOA, MIGUEL**
STREET ADDRESS **2929 SW 3RD AVE.**
CITY-ST-ZIP **MIAMI FL 33129**

TITLE **P** ☐ Delete
NAME **DUFRESNE, ELIZABETH J**
STREET ADDRESS **2929 SW 3RD AVE**
CITY-ST-ZIP **MIAMI FL 33129**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **VPST** ☒ Change ☐ Addition
NAME **GAMBOA, MIGUEL**
STREET ADDRESS **2200 BISCAYNE BLVD. #323**
CITY-ST-ZIP **MIAMI FL 33137**

TITLE **P** ☒ Change ☐ Addition
NAME **DUFRESNE, ELIZABETH J**
STREET ADDRESS **2200 BISCAYNE BLVD. #323**
CITY-ST-ZIP **MIAMI FL 33137**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 an officer like empowered.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MIGUEL GAMBOA, VPRES.

2/11/02 305-438-0511

Date Daytime Phone #

CR2E034 (9/01)