

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Oct 01 1998 8:00am
Secretary of State

DOCUMENT # **P97000039577 (6)**

1. Corporation Name

GLOBAL TOURIST SERVICES, INC.

Principal Place of Business

**1101 BRICKELL AVENUE #200
MIAMI FL 33131**

Mailing Address

**1101 BRICKELL AVENUE #200
MIAMI FL 33131**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/05/1997

4. FEI Number

65-0749550

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent

81 Name

JAMES DICKEY

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

1101 BRICKELL AVE #200

83

84 City

MIAMI

FL

85 Zip Code

33131

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 607.0605, Florida Statutes.

SIGNATURE **JAMES DICKEY**

Signature, typed or printed name of registered agent and the applicable

(NOTE: Registered Agent signature required when reinstating)

7/30/98

DATE

12. OFFICERS AND DIRECTORS

TITLE **PTD**
NAME **ESQUENAZI, JOEL**
STREET ADDRESS **1101 BRICKELL AVENUE #200**
CITY-ST-ZIP **MIAMI FL 33131**

☐ DELETE

TITLE **VSD**
NAME **BAUGH, LARRY R JR**
STREET ADDRESS **1101 BRICKELL AVENUE #200**
CITY-ST-ZIP **MIAMI FL 33131**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**TREASURER
DAVID LANGLE
1101 BRICKELL #200
MIAMI FLA 33131**

☒

Change ☐ Addition

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Change ☐ Addition

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Change ☐ Addition

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Change ☐ Addition

14. 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 changed, or on an attachment with an address.

SIGNATURE

DAVID LANGLE

7/30/98

305-577-9700

CR2E034 (5/98)