

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

FILED
May 06 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # P97000043026 (8)

1. Corporation Name
EXCURSIONS, INC.



Principal Place of Business 100 SOUTHEAST 2ND STREET 21ST FLOOR MIAMI FL 33131	Mailing Address 100 SOUTHEAST 2ND STREET 21ST FLOOR MIAMI FL 33131
--	--

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
05/14/1997

2. Principal Place of Business 21 1955 Griffin Rd Suite, Apt. #, etc. 22 # A-318 City & State 23 Dania Zip 24 33004 Country 25 USA	2a. Mailing Address 26 1955 Griffin Rd. Suite, Apt. #, etc. 27 # A-318 City & State 28 Dania Zip 29 33004 Country 30 USA
---	---

4. FEI Number
65-0754031

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

9. Name and Address of Current Registered Agent
**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

10. Name and Address of New Registered Agent
81 Name **Richard L. Allen**
82 Street Address (P.O. Box Number is Not Acceptable)
Museum Tower, Suite 2000
83 **150 W. Flagler St.**
84 City **Miami** FL 85 Zip Code **33130**

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 duties of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* DATE **4/6/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	James R. Levine <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	P.D.	1.2 NAME	
STREET ADDRESS	1955 Griffin Rd, # A-318	1.3 STREET ADDRESS	
CITY-ST-ZIP	Dania, FL 33004	1.4 CITY-ST-ZIP	
TITLE	Secretary <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Richard L. Allen	2.2 NAME	
STREET ADDRESS	150 W. Flagler St #2000	2.3 STREET ADDRESS	
CITY-ST-ZIP	Miami, FL 33130	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 in an attachment with address.

SIGNATURE: *[Signature]* DATE **4/6/98** **305371-2223**

CR2E034 (10/97)