

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000071990

FILED
Jan 06, 2003
Secretary of State

Entity Name: GAMES AND TRAVEL, INC.

Current Principal Place of Business:

PO BOX 61128
FORT MYERS, FL 33906

New Principal Place of Business:

Current Mailing Address:

PO BOX 61128
FORT MYERS, FL 33906

New Mailing Address:

FEI Number: 65-0776212 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KORNIK, GARY H
20801 BISCAYNE BLVD., STE. 505
C/O FROMBERG, FROMBERG, LEWIS & BRECKER, PA
AVENTURA, FL 33180 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WEHBY, O.J.
Address: 13601 PARKCREST BLVD. #1317
City-St-Zip: FT. MYERS, FL 33912

Title: D (X) Delete
Name: WEHBY, HARLENE
Address: 13601 PARKCREST BLVD.#1317
City-St-Zip: FT. MYERS, FL 33912

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WEHBY, O.J.
Address: P.BOX 61128
City-St-Zip: FT. MYERS, FL 33906

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: O J WEHBY

P

01/06/2003

Electronic Signature of Signing Officer or Director

Date