FILED
May 29, 2002 8:00 am
Secretary of State
04-24-2002 90403 036 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000076077

1. Entity Name.
AXEL'S TOUR SERVICE, INC.

Principal Place of Business	Mailing Address
1407 NE 60TH ST FT LAUDERDALE FL 33334	1407 NE 60TH ST FT LAUDERDALE FL 33334

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
4647 Way Cross Dr Suite, Apt. #, etc.	4647 Way Cross Dr. Suite, Apt. #, etc.
City & State: Coconut Creek	City & State: Coconut Creek
Zip: 33073 Country: Broward	Zip: 33073 Country: Broward

4. FEI Number 65-0784503 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FAUST, AXEL 1407 NE 60 ST FT LAUDERDALE FL 3334 Axel Faust 4647 Way Cross Dr Coconut Creek. FL. 33073	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DPST FAUST, AXEL S 1407 NE 60TH ST FT LAUDERDALE FL 33334	President ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	4647 Way Cross Dr. Coconut Creek.	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	FL. 33073	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (8/01)

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 all other like empowered.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OR OFFICER OR DIRECTOR

OFFICIAL CORPORATE SEAL
AXEL'S TOUR SERVICE, INC.
FLORIDA 1997

AXEL'S TOUR SERVICE
Axel Faust
4647 Way Cross Dr.
Coconut Creek, FL 33073

5.8.02