↓ → PROFIT CORPORATION **ANNUAL REPORT**

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000086678

1. Corporation Name

INTERNATIONAL TRAVEL & SPICE INC

Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90215 018 ***150.00

Principal Place of Business Mailing Address 7653 NW 79 AVE APT 311 TAMARAC FL 33321 US 2. Principal Place of Business 24. Mailing Address Applie 25. Principal Place of Business 26. T653 NW 79 AVE APT 311 TAMARAC FL 33321 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 10/08/1997 4. FEI Number 65-0790355 Not Applie	ed For
PLANTATION FL 33317 APT 311 TAMARAC FL 33321 US 3. Date Incorporated or Qualifed 10/08/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number CE-0700355	ed For
PLANTATION FL 33317 APT 311 TAMARAC FL 33321 US 3. Date Incorporated or Qualifed 10/08/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number CE-0700355	ed For
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Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Require	,
City & State 6. Election Campaign Financing \$5.00 Ma	ay Be
TAMARAC, FL 28 TAMARAC, FL Trust Fund Contribution Added to F	Fees
Zip Country Zip Country 8. This corporation owes the current year intangible Personal Property Tax 1 Yes TV	No
24 5 5 C 25 C 29 5 5 C 1 SU C	5190
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name	$\overline{}$
TERRELONGE, FRANCIS	
7653 NW 79 AVE #311 82 Street Address (P.O. Box Number is Not Acceptable)	
TAMARAC FL 33321	
84 City FL 85 Zip Cod	de
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 reg 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 regist agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.	harataine
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: