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

PROFIT **CORPORATION ANNUAL REPORT**

1998



L'ORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000087003 (4)

FILED Jun 08 1998 8:00am Secretary of State

UNLINE	E THAVEL & TOURS, INC.				
Principal Plac	e of Business	Mailing Address			
2542 N FEDE	RAL HIGHWAY	2542 N FEDERAL HIGHWAY			
FT. LAUDERDALE FL 33305		FT. LAUDERDALE FL 33305			DO AIGT INDITE IN THE SPACE
					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified 10/08/1997
2. Principal P	2a. Mailing Address			4. EBI Number Applied For	
21		26			65-0788084 Not Applicable
	Suite, Apt. #, etc. Suite, Apt. #, etc.				5 Contitionto of Status Desired 7 \$8.75 Additional
22 27					Fee Required
City & State		City & State	' '1		Election Campaign Financing \$5.00 May Be
23					Trust Fund Contribution Added to Fees
Zip	Country	- Д ф ДТ1	Cou	ntry	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
24	25 9. Name and Address of Curre	nt Pagistered Agent	30		Personal Property Tax due June 30. ATYPES L. No 10. Name and Address of New Registered Agent
DIE		in Hohistoren Agent		81 Name	10, Hallio and Address of New Hogisteres Agent
24 N.W 07TH CTDECT					
MIAMI SHORES FL 33150				82 Street Ad	dress (P.O. Box Number is Not Acceptable)
1910	an ononeo i e ootoo			83	
				B4 City	FL 85 Zip Code
11. Pursuant office or r agent. I a	to the provisions of Sections 607.05t ogistered agent, or both, in the State m familiar with, and accept the oblig	02 and 607.1508, Florida Statu cof Horida Such change was pations of, Section 607.0505, F	tes, the ab authorized lorida Stati	pove-named co i by the corpor ules.	orporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
SIGNATURE		· · · · · · · · · · · · · · · · · · ·	·		DIF
12.	Signature typed or protest manic of registered as OFFICERS: AN	ID DIRECTORS	13.	Agent signature req	urod when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PI	DELETE	1.1 10	LF	☐ Change ☐ Addition
NAME	RIBEIRO, HELCIO C	_	1.2 NA	ME	
STREET ADDRESS	34 N.W. 97TH ST.		1.3 ST	REET ADDRESS	
CITY-ST-ZIP	MIAMI SHORES FL 33150		1.4 00	Y-SI-ZIP	
TITLE	VS	☐ DELFTE	21 TII	LF	☐ Change ☐ Addition
NAME	KUATT, ALAN		22 NA	ME	
STREET ADDRESS	\$4 N.W. 97TH STREET		2.3 \$1	REET ADDRESS	
CITY-ST-ZIP	MIAMI SHORES FL 33150		2.4 CI	TY-ST-ZIP	
TITLE	□ DELETE 317		3171	Lŧ	Change Addition
NAME			3.2 NA	ME	
STREET ADDRESS			3.3 ST	REE1 ADDRESS	
CITY - ST - ZIP				IY - S1 - 7/P	
TITLE	DECETÉ 4.1 TI			Change L Addition	
NAME			4. 2 N/	MME .	(# 100)
STRIMET ADDRESS				REET ADDRESS	$\mathcal{H} \setminus \mathcal{O} \setminus \mathcal{O} \setminus \mathcal{O}$
CITY-ST-ZIP		C or ear		Y - S1 - ZIP	Okas D Addition
TITLE		☐ DELETE	5.1 1(1		Change L Addition
NAME			5.2 NA		
STREET ADDRESS				REET ADDRESS	
CITY-ST-ZIP	A STATE OF THE PARTY OF THE PAR			Y-S1-ZIP	Change Addition
TITLE		FT DESCR	6.1 111	1	90002552099
NAME ATREET AROUSEDS			6.2 NA	1	-06/09/9801015006
STREET ADDRESS				REET ADDRESS	***150.00
CITY-ST-ZIP			■ 6.4 CH	Y · S1 - ZIP	TO TOTAL A SERVE A SERVE

14. Lereby cortify 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 of the receiver or frue ce 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, in the made appears in an attachment with an address.