

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Oct 13 1998 8:00am
Secretary of State

DOCUMENT # **P97000100193 (6)**

1. Corporation Name

FLORIDA INTERNATIONAL GUEST SERVICES, INC.



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/25/1997

4. FEI Number

☒ Applied For
☐ Not Applicable

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

2. Principal Place of Business

Mailing Address

**7301 CROOKED LAKE CIRCLE
ORLANDO FL 32818**

**7301 CROOKED LAKE CIRCLE
ORLANDO FL 32818**

21. Suite, Apt. #, etc.

2a. Mailing Address

26. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

24.

25.

29.

30.

9. Name and Address of Current Registered Agent

**JOSEPH, WILSON G
7301 CROOKED LAKE CIRCLE
ORLANDO FL 32818**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.0508, 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 obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
NAME **SIMON, EDOUARD**
STREET ADDRESS **5400 TIMBERLEAF BLVD. #903**
CITY-ST-ZIP **ORLANDO FL 32811**

TITLE **D** ☐ DELETE
NAME **JOSEPH, WILSON G**
STREET ADDRESS **7301 CROOKED LAKE CIRCLE**
CITY-ST-ZIP **ORLANDO FL 32818**

TITLE **D** ☐ DELETE
NAME **JOSEPH, JEANIDE**
STREET ADDRESS **7301 CROOKED LAKE CIRCLE**
CITY-ST-ZIP **ORLANDO FL 32818**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS **300002662863**
2.4 CITY-ST-ZIP **-10/13/98-01068-001**

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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 on an attachment with an address.

SIGNATURE:

CR2E034 (5/98)

2



Florida International Guest Services, Inc.

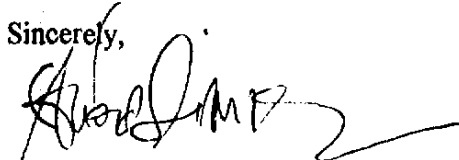
September 28, 1998

Florida Department of State
Division of Corporations
Annual Reports Filings
PO. Box 1500
Tallahassee, FL 32302-1500

To whom it may concern:

As per my recent conversation with an employee in that division, please find enclosed check # 434 in the amount of \$ 150.00 to cover the cost of the initial filing fee. We did not receive the first preprinted annual report that was sent to us (see letterhead for discrepancy in our zip code) and I was advised by that employee to send the initial amount with a letter stating why we are late submitting our report.

We apologize for the delay and want to thank for your cooperation in this matter.

Sincerely,


Edouard Simon
Vice President of Marketing

Enc.(2)

Check & Annual report