

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

FILED

**Feb 11 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # P97000100229 (8)
1. Corporation Name
VACATION TOUR SERVICES, INC.



Principal Place of Business: **806-A NW 13TH AVENUE DANIA FL 33004**
Mailing Address: **806-A NW 13TH AVENUE DANIA FL 33004**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 **806-A NW 13th Ave**
22 Suite, Apt. #, etc.
23 **DANIA, FL**
24 **33004** 25 **USA**

2a. Mailing Address
26 **806-A NW 13th Ave**
27 Suite, Apt. #, etc.
28 **DANIA, FL**
29 **33004** 30 **USA**

3. Date Incorporated or Qualified
11/21/1997

4. FEI Number
65-0806820 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

9. Name and Address of Current Registered Agent
**WHERRY, STEVEN S
3020 N.W. 33RD AVENUE
FT. LAUDERDALE FL 33311**

10. Name and Address of New Registered Agent
81 Name **MICHELLE MILLER**
82 Street Address (P.O. Box Number is Not Acceptable)
555 NW 62nd ST.
83
84 City **Ft. Lauderdale** FL 85 Zip Code **33309**

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 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 *Michelle Miller* (NOTE: Registered Agent signature required when re-registering) DATE

12. OFFICERS AND DIRECTORS		DELETED
TITLE	D	<input checked="" type="checkbox"/>
NAME	WHERRY, STEVEN S	
STREET ADDRESS	806-A NW 13TH AVENUE	
CITY-ST-ZIP	DANIA FL 33004	
TITLE	D	<input type="checkbox"/>
NAME	MILLER, MICHELLE	
STREET ADDRESS	806-A NW 13TH AVENUE	
CITY-ST-ZIP	DANIA FL 33004	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME	000002428140		
5.3 STREET ADDRESS	-02/11/98--01088--026		
5.4 CITY-ST-ZIP	***8.75		
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
6.2 NAME	000002428140		
6.3 STREET ADDRESS	-02/11/98--01088--025		
6.4 CITY-ST-ZIP	***150.00		

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 *Michelle Miller* 1/22/98 9511 072 5111 11/98

CR2E034 (10/97)