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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 1. Corporation Name P97000108730 (7)

	d travels of south flo	PRIDA, INC.		
Principal Place of Business Mailing Address				, sedriedt vid Jahl latti gent dant falet lifti gest sant 19641 tilli 4fti fabr
3450 S.W. 17TH STREET 3450 S.W. 17TH STREET FT. LAUDERDALE FL 33312 FT. LAUDERDALE FL 3331				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified
2 Principal P	Place of Business	2a. Mailing Address		12/23/1997 4. FEI Number Applied For
21		26		65-0826528   Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		SR 75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25	29	30	Personal Property Tax due June 30.  Yes No
	9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New Registered Agent
FT	22 S.E. 3RD. AVE. . LAUDERDALE FL 33316	`	83 84 City	dress (P.O. Box Number is Not Acceptable)  FL 85 Zip Code
11. Pursuant office or r agent. I a	to the provisions of Sections 607.050: registered agent, or both, in the State am familiar with, and accept the obliga	2 and 607.1508, Florida Statut of Florida Such change was a ations of, Section 607.0505, Flo	es, the above-named cor authorized by the corpora orida Statutes.	rporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered agri	A COLUMN TO THE	E. Registered Agent signature requ	uired when reinstating) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	Change Addition
NAME	SCHIANO, BRYAN		1.2 NAME	
STREET ADDRESS	3450 S.W. 17TH STREET		1.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL 33312		1.4 CITY-ST-ZIP	
TITLE	D	DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	SCHIANO, MARY ANN		2.2 NAME	
STREET ADDRESS	3450 S.W. 17TH STREET		2.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL 33312		2.4 CITY-ST-ZIP	
TITLE		☐ D€LETE	3.1 TITLE	☐ Change ☐ Addition
NAME			32 NAME	
STREET ADDRESS			3 3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY - ST - ZIP	
TITLE		☐ DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
Trib E	l	DELETE	E 4 TITLE	Channe Addition

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 trusted 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 ardress.

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

DELETE

04/28/98

9545838035

Addition

**FILED** 

May 07 1998 8:00am

Secretary of State