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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000043601 1. Corporation Name

Principal Place of Business

FLORIDA VACATION SALES & MARKETING, INC.

Mailing Address

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90295 033 ***150.00 05-06-1999 90295 034 ****13.75



y W. VINE \$ -= 206	• · ·	3369 W. VINE STREET SUITE 206							
FL	34741	KISSIMMEE FL 34741				3. Date Incorporated or Qualifed 05/12/1998	TE IN TH	IS SPACE	
n-: :1 0	land (Outline)	2a Mailing Address				4 EEI Number		1 1	policel For
IILCA	ScE. 3 PA AVENUE	2a. Mailing Address	·	DD ALK	NU	4. FEI Number 29-3510372		⊢ - /	pplied For ot Applicable
Suite, Apt.		26 / #10 3 / C / Suite, Apt. #, etc.	<u> </u>	7/40			<u>_</u>		Additional
¥ 403 27 # 403						5. Certifcate of Status Desired	X		equired
				FL		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 330	04 25 4SA	29 33004	30 Co	untry 451	(This corporation owes the curl Personal Property Tax.	ent year i	ntangible Yes	□No
	9. Name and Address of Current	Registered Agent		l		10. Name and Address of New I	Registere	d Agent	
LIAVI	es, robert s			81 Name	.Τε	KIC ALEKSANI	AIZ		
		82 Street	Addres	s (P.O. Box Number is Not Accept	able).				
441 '			00	5.W. 26474	Sti2	<u>ee T</u>			
Nigo	IMMEE FL 34741			83					
						HE STEAD	F	L]33	Code 03/
Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	ites, the a	bove-named	corpor	ation submits this statement for the	purpose	of changing its	registered
agent. I a	egistered agent, or both, in the State of m familiar with, and adcept the obligation	ons of, Section 607.0505, FI	orida Stat	tutes.	oranon 	A	n ine app	11 10	,gisterou
MA LUDE	(Dekryw	\mathcal{D} .	MIC	vez V	'UL)	C, PESSINGNI	5	127/4	<u> </u>
	Signature, typed of printing large of registered agent a	and title if applicable. (NOT	E: Registered	d Agent signature	required v	when einstating)	DATE /	NO DIOCOTA	200 111 40
	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS A	Change	DRS IN 12 ☐ Addition
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l hereby c	ertify that the information supplied with	this filing does not qualify for			t in Se	ction 119 07(3)(i) Florida Statutes	further c	ertify that the	information

reply using that the monitoring supplied with this litting does not quality for the exemption stated in Section 119.07(3)(i), Frontia Statutes. I further certify that the information is annual report or suppliemental 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 it is undirector of the carba thing of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in 12 or Block 13 if changed, of on an attachment with an address, with all other like empowered.