## 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 # P98000100037 1. Corporation Name

VIZCAYA TRAVEL, INC.

Mailing Address Principal Place of Business 2 SOUTH BISCAYNE BLVD. 2 SOUTH BISCAYNE BLVD. SUITE 3400 **SUITE 3400** DO NOT WRITE IN THIS SPACE MIAMI FL 33131 MIAMI FL 33131 3. Date Incorporated or Qualifed 12/01/1998 2a. Mailing Address 4. FEI Number 2. Principal Place of Business 65-0878810 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country Zip Zip Country This corporation owes the current year Intangible Personal Property Tax. 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name VALDES-FAULI CORPORATE SERVICES, INC. 82 Street Address (P.O. Box Number is Not Acceptable) 2 SOUTH BISCAYNE BLVD. **SUITE 3400** 83 **MIAMI FL 33131** 85 Zip Code 84 City SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Addition DELETE 1.1 TITLE ☐ Change TITLE URIA, JAVIER 1.2 NAME Úria, Javier NAME 2 SOUTH BISCAYNE BLVD., SUITE 3400 1.3 STREET ADDRESS 2 S. Biscayne Blvd., Ste 3400 STREET ADDRESS **MIAMI FL 33131** 1.4 CITY-ST-ZIP <u>Miami, Florida 33131</u> CITY-ST-ZIP Addition □ DELETE 2.1 TITLE TITLE Molinuevo, Maria Jesus 2.2 NAME NAME 2 S. Biscayne Blvd. Ste 3400 2.3 STREET ADDRESS STREET ADDRESS Miami Florida 33131 CITY-ST-ZIP 2.4 CITY-ST-ZIP ☐ Addition DELETE ☐ Change 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS SYREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ Addition ☐ DELETE ☐ Change 5.1 TITLE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP ... Addition 6.1 TITLE ☐ Change ☐ DELETE TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-7IP

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 of 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 with the like empowered.

SIGNATURE:

JAVIÉR URIA

CR2E034 (11/98)

Applied For

Not Applicable

May 06, 1999 8:00 am Secretary of State

05-06-1999 90088 010 \*\*\*150.00