

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000012015

1. Entity Name
SEVEN ELEVEN TOURS FLORIDA, INC.

FILED
Jul 29, 2002 8:00 am
Secretary of State

07-29-2002 90008 024 ***158.75

Principal Place of Business
5642 CORTEZ ROAD WEST
BRADENTON FL 34210

Mailing Address
5642 CORTEZ ROAD WEST
BRADENTON FL 34210



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0908466

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GORMAN, WILLIAM
3200 COQUINA ESPLANA
PUNTA GORDA FL 33950

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME HAAS, JULIUS
STREET ADDRESS 515 BROAD HOLLOW RD.
CITY-ST-ZIP MELVILLE NY 11747 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE EVP
NAME SHORE, PATRICIA J
STREET ADDRESS 44 MARILYN COURT
CITY-ST-ZIP WEST BABYLON NY 11704 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE Senior Vice President
NAME Thomas J. Haas
STREET ADDRESS 16 LEWARD LANE.
CITY-ST-ZIP Connecticut NY. 11725 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)

ANNUAL BUSINESS REPORT (UBR)

P99000012015

675977

EN TOURS FLORIDA, INC.

Attachment

Principal Place of Business
56-42 CORTEZ RD. WEST
BRADENTON FL 34210

Mailing Address
56-42 CORTEZ RD. WEST
BRADENTON FL 34210

Principal Place of Business
5642 Cortez Rd. West
Suite, Apt. #, etc.

3. Mailing Address
5642 Cortez Rd. West
Suite, Apt. #, etc.

City & State
Bradenton FL.
Zip
34210
Country

City & State
Bradenton FL.
Zip
34210
Country

4. FEI Number 65-0908466
Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
SCHORPP, GLORIA
208 MAGNOLIA AVE.
ANNAMARIE FL 34216

7. Name and Address of New Registered Agent
Name GORMAN, William
Street Address (P.O. Box Number is Not Acceptable)
3200 COQUINA Esplanade
City Punta Gorda FL 33950

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE William GORMAN

Aug. 23, 2001

This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing...
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS	
PD HAAS, JULIUS 515 BROAD HOLLOW RD. MELVILLE NY 11747	<input type="checkbox"/> Delete
	<input type="checkbox"/> Delete
	<input type="checkbox"/> Delete
	<input type="checkbox"/> Delete
	<input type="checkbox"/> Delete
	<input type="checkbox"/> Delete
	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President <input type="checkbox"/> Change <input type="checkbox"/> Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Executive Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PATRICIA J. Shore 44 Marylyn Ct. W. Babylon NY. 11704 <input type="checkbox"/> Change <input type="checkbox"/> Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add

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 report or supplemental 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 11 or Block 12 of this report.

SIGNATURE: [Signature] Exec. V.P. 8/23/01 631-454-9200 E43

OUR SERVICE.
Travel Company.

5642 Cortez Road West
Bradenton, Florida 34210

** One-hundred-fifty-eight dollars and 75/100 **

DEPARTMENT OF STATE

TO THE
ORDER
OF

BANK OF AMERICA
3401 CORTEZ ROAD WEST
BRADENTON, FL 34210

63-27-631

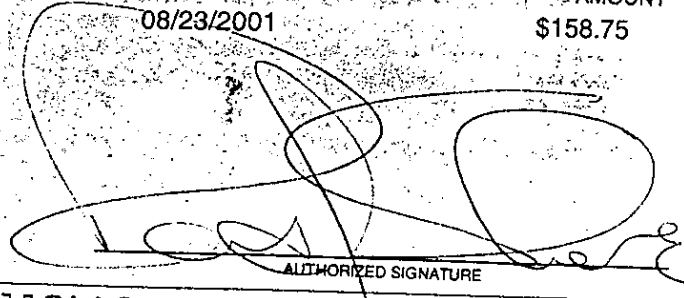
678977
#P99000012015

DATE

08/23/2001

AMOUNT

\$158.75


AUTHORIZED SIGNATURE

000001687

⑈001687⑈ ⑆063100277⑆ 3604461103⑈

000001687

08/23/2001

DEPARTMENT OF STATE

\$158.75

G/L Account
60400005

Comment

Paid Amount
158.75

000001687

08/23/2001

DEPARTMENT OF STATE

\$158.75

G/L Account
60400005

Comment

Paid Amount
158.75



Attachment

675977
P99000012015

515 BROAD HOLLOW ROAD, MELVILLE, NY 11747
(516) 454-9200 • 1 (800) 645-0711 • FAX (516) 454-9148
e-mail: seven11tur@aol.com • www.travelhub.com/seven11/

July 24, 2002

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL. 32302-1500

RE: Doc. # P99000012015
Seven Eleven Tours Florida, Inc.

To whom it may concern:

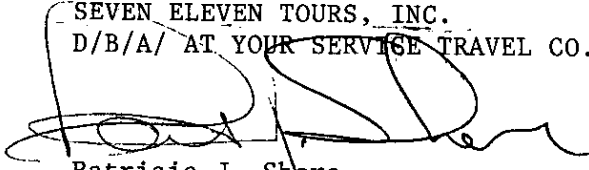
Enclosed please find the UBR for the above mentioned document number along with our check #2136 in the amount of \$158.75. This is the second year I need to advise you that we never received the first report with the due date of May 2002 and would appreciate it if you kindly waive the late file fee.

Please advise why we are not receiving the first mailing annually. If there is anything further required please do not hesitate to contact me at the above number extension 137.

Thank you for your time in resolving this matter,

Sincerely,

SEVEN ELEVEN TOURS, INC.
D/B/A/ AT YOUR SERVICE TRAVEL CO.


Patricia J. Shore
Executive Vice President

PS/j1
encs.



AT YOUR SERVICE®

Travel Company

Attachment

675977

P99000012015

515 Broad Hollow Road

Melville, New York 11747

631-454-9200

1-800-645-0711

Fax: 631-454-9148

e-mail: travel@atyour servicetravel.com

www.atyour servicetravel.com

LAST
YEAR
FILING

Aug. 23, 2001

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

RE; Doc. # P99000012015
Seven Eleven Tours Florida, Inc.

To whom it may concern:

Please note I have enclosed the UBR for the above mentioned document number along with filing fee of \$158.75. We never received the first report with the due date of May 2001 and would appreciate it if you kindly waive the late file fee.

If there is anything further required please do not hesitate to contact me at the above number extension 137.

Thank you for your understanding in this matter.

Sincerely,
AT YOUR SERVICE TRAVEL CO.

Patricia J. Shore
Executive Vice President

PS/jl
encs.