

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P99000035438**

1. Entity Name

ACE TOURS + TRANSPORTATION, INC.

Principal Place of Business

Mailing Address

17290 N.E. 19TH AVENUE
NORTH MIAMI BEACH FL 33162-2210

2. Principal Place of Business

10795 N.W. 64TH CT.

3. Mailing Address

5944 CORAL RIDGE DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PARKLAND, FL

City & State

CORAL SPRINGS FL

Zip

33076

Country

USA

Zip

33076

Country

USA

4. FEI Number

65-0912430

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ALMAN, MARTIN H

17290 N.E. 19TH AVENUE

NORTH MIAMI BEACH FL 33162-2210

7. Name and Address of New Registered Agent

Name

MARTIN H. ALMAN

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

17290 NE 19TH AVE

City

NO. MIAMI BEACH, FL

FL

Zip Code

33162

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.

SIGNATURE

Martin H. Alman MARTIN H. ALMAN

11/1/01

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

(NOTE: Registered Agent signature required when reinstating)

D/E

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 \$450.00
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

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSDT
KARP, EYAL A.
10795 N.W. 64TH CT.
PARKLAND, FL 33076

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

Eyal A. Karp EYAL A. KARP

11/1/01 954-791-6575

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0049874 AV

CR2E034 (5/01)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

01 NOV 27 PM 4:28

DO NOT WRITE IN THIS SPACE

ACE TOURS & TRANSPORTATION INC.
5944 CORAL RIDGE DRIVE #122
CORAL SPRINGS, FL 33076

November 21, 2001

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
PO BOX 6327
TALLAHASSEE, FL 32314

GENTLEMEN:

I AM ENCLOSING HERewith MY 2001 CORPORATION UNIFORM BUSINESS REPORT.
AS YOU WILL SEE FROM YOUR RECORDS, MY ADDRESS HAS CHANGED. I NEVER
RECEIVED THE ORIGINAL REPORT FORMS OR THE FOLLOW-UP FORMS. I HAD MAILED IN
A CHECK EARLIER IN THE YEAR, BUT THE CHECK WAS NEVER DEPOSITED. I FOUND
OUT THAT THE CORPORATION WAS DISSOLVED WHEN I WENT TO RENEW A LICENSE FOR
PORT EVERGLADES. THEY TOLD ME THAT THE CORPORATION WAS DISSOLVED.
PLEASE ACCEPT THE ENCLOSED CHECK FOR 150.00 TOGETHER WITH A 2001 UBR.
IF YOU HAVE ANY PROBLEM, PLEASE CALL ME AT 954-791-6575.
THANK YOU VERY MUCH.

Eyal A. Karp
EYAL A. KARP, PRESIDENT