FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2002 8:00 am
Secretary of State
05-21-2002 91151 004 ***150.00

DOCUMENT # P99000041529

1. Entity Name
Discount Travel club corporation

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1083 N. Collier Blvd	1083 N. Collier Blvd
Suite, Apt. #, etc. # 150	Suite, Apt. #, etc. # 150
City & State Marco Island, FL	City & State Marco Island, FL
Zip 34145 Country USA	Zip 34145 Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3574289 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Jeff Popick

Street Address (P.O. Box Number is Not Acceptable): 1083 N. Collier Blvd # 150

City: Marco Island **FL** Zip Code: 34145

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: Jeff Popick
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) ☑

January 1 - May 1, Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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	PSTD
NAME	Jeff Popick
STREET ADDRESS	999 spruce ave
CITY-ST-ZIP	Marco Island, FL 34145
TITLE	V
NAME	Debbie Popick
STREET ADDRESS	1083 N. Collier Blvd #150
CITY-ST-ZIP	Marco Island FL 34145
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NAME	
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: Jeff Popick Jeff Popick 4-30-02 941-394-4000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #