

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000105719

FILED  
Apr 30, 2002 8:00 AM  
Secretary of State

Entity Name: EUREKA SPECIALTY TRAVEL, INC.

## Current Principal Place of Business:

1850 LEE RD.,STE.321  
SUITE 324  
WINTER PARK, FL 32789

## New Principal Place of Business:

7408 ALOMA AVE  
WINTER PARK, FL 32792

## Current Mailing Address:

1850 LEE RD.,STE.321  
SUITE 324  
WINTER PARK, FL 32789

## New Mailing Address:

7408 ALOMA AVE  
WINTER PARK, FL 32792

FEI Number: 59-3611369

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DENNER, VALERIE L  
1850 LEE RD.,STE.321  
ORLANDO, FL 32789 US

## Name and Address of New Registered Agent:

DENNER, VALERIE L  
2250 LEE RD  
102  
WINTER PARK, FL 32789 US

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:

04/30/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MATTSSON, LENNART  
Address: FROSNAS 201,96024 HARADS  
City-St-Zip: SWEDEN,

Title: D ( ) Delete  
Name: MATTSSON, EVA ULRIKA  
Address: 8123 LAKE SERENE DR.  
City-St-Zip: ORLANDO, FL 32836

Title: D ( ) Delete  
Name: DENNER, VALERIE L  
Address: 8123 LAKE SERENE DR.  
City-St-Zip: ORLANDO, FL 32836

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: MATTSSON, EVA ULRIKA  
Address: 8849 LATREC AVE #310  
City-St-Zip: ORLANDO, FL 32819

Title: D (X) Change ( ) Addition  
Name: DENNER, VALERIE L  
Address: 8849 LATREC AVE #310  
City-St-Zip: ORLANDO, FL 32819

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EVA U. MATTSON

D

04/30/2002

Electronic Signature of Signing Officer or Director

Date