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PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Katherine Harris

DIVISION OF CORPORATIONS

Secretary of State ANNUAL REPORT 1999

FILED Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90129 043 ***150.00

1. Corporation	MENT # S06464 E DESTINATIONS, INC.								
Principal Place	of Business	Mailing Address	•						
12670 NEW BRIT		12670 NEW BRIT	12670 NEW BRITTANY BLVD.			Ì			
SUITE 101		SUITE 101 FT. MYERS FL 33907			DO NOT WRITE IN THIS SPACE				
FT. MYERS FL 3	33907	FI. MIEKS PL 3	3907			3. Date incorporated or Qualifed			
						10/17/1990			
2 Principal Pla	ace of Business	2a. Mailing Add	ress			4. FEI Number			ed For Applicable
	400 U. D. 2000	26				65-0222459		\$8.75 Ad	
Suite, Apt. #	#, etc.	Suite, Apt. #	, etc.			5. Certificate of Status Desired	o .	Fee Requ	
22		27				6. Election Campaign Financing		\$5.00 M	lav Be
City & State	9	City & State)			Trust Fund Contribution		Added to	· .
23		28		Country		8. This corporation owes the cu	rrent year Inta	ngible	
Zip	Country	Zip	30			Personal Property Tax.		Yes L	No
24	9. Name and Address of Curren	29 Agent		Ţ		10. Name and Address of New	Registered A	gent	
	9. Name and Address of Curren	t regioto. va vişem		81	Name				
ROY	ston, robert D., Jr. 70 New Brittany Blyd., Suite	: 101		82	Street Ad	dress (P.O. Box Number is Not Accep	otable)		
126/	IT MYERS FL 33907	. 101		83					
FUR	II MITCHS I E 35307				<u> </u>			85 Zip Ci	ode
				84	1 -		FL	11	\ .
		0 - 4 COZ 1509 Ele	cida Statutes	the abov	e-named co	rporation submits this statement for the	le puipose of	4ma=t ac rad	ictored l
11. Pursuant office or ragent. I a	registered agent, or both, in the otalical manufamiliar with, and accept the obligation	itions of, Section 60	7.0505, Florida	Statute	S.	rporation submits this statement for the stateme	DATE		
office of ragent. I a	am familiar with, and accept the obligation	ntions of, Section 60 and and title if applicable.	7.0505, Florida	Statute	S.	riporation submits this statement of ution's board of directors. I hereby accurate when reinstating) ADDITIONS/CHANGES TO	DATE	D DIRECTOR	RS IN 12
office of ragent. I a SIGNATURE 12.	registered agent, or both, in the state am familiar with, and accept the obligation of the state	ations of, Section 60 and and title if applicable.	7.0505, Florida	Statutes	S.	ired when rainstating)	DATE		
office or ragent. I a SIGNATURE 12.	Signature, typed or printed name of registered age OFFICERS AN	ations of, Section 60 and and title if applicable.	7.0505, Florida (NOTE: Reg	Statute:	S. ent signature requ	ired when rainstating)	DATE	D DIRECTOR	RS IN 12
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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 to 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 all other like empowered.

SIGNATURE:

1-25-99