

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**  
**Apr 27 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Bandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # S15716 (1)**  
 1. Corporation Name  
**CUE TRAVEL FLORIDA, INC.**



Principal Place of Business <b>5750 MAJOR BLVD.                  SUITE #273                  ORLANDO FL 32819                  US</b>	Mailing Address <b>5750 MAJOR BLVD.                  SUITE #273                  ORLANDO FL 32819                  US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>21 5850 Lakehurst Drive</b> Suite, Apt. #, etc. <b>22 Suite 150-12</b> City & State <b>23 Orlando, Florida</b> Zip <b>24 32819</b>	2a. Mailing Address <b>26 5850 Lakehurst Drive</b> Suite, Apt. #, etc. <b>27 Suite 150-12</b> City & State <b>28 Orlando, Florida</b> Zip <b>29 32819</b>
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3. Date Incorporated or Qualified <b>11/29/1990</b>	4. FEI Number <b>59-3038092</b>	Applied For <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent  
**SUZUKI, HIROSHI**  
**4680 SUMMER OAK ST., #4204**  
**ORLANDO FL 32835**

10. Name and Address of New Registered Agent  
**81 Name Kazumi Liley**  
**82 Street Address (P.O. Box Number is Not Acceptable) 5942 Tradewinds Lw.**  
**83 City Orlando**  
**84 State FL**  
**85 Zip Code 32819**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Mamoru Tanaka* / *Kazumi Liley* **3/31/98**

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>MORI, GORO</b> <b>340 EAST 64TH ST., #18-M</b> <b>NEW YORK NY</b>	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>TANAKA, MAMORU</b> <b>300 EAST 40TH ST., #32-S</b> <b>NEW YORK NY</b>	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>SUZUKI, HIROSHI</b> <b>4680 SUMMER OAK ST., #4204</b> <b>ORLANDO FL</b>	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<b>Director</b> <b>Hiroshi Suzuki</b> <b>5113 Park Central Dr., #718</b> <b>Orlando, FL 32839</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<b>General Manager</b> <b>Kazumi Liley</b> <b>5942 Tradewinds Lw.</b> <b>Orlando, FL 32819</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: *Mamoru Tanaka* **3/10/98** **(407) 352-9686**

CR2E034 (10/97)