

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

FILED
Apr 27 1998 8:00am
Secretary of State

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

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

2. Principal Place of Business 21 5850 Lakehurst Drive Suite, Apt. #, etc. 22 Suite 150-12 City & State 23 Orlando, Florida Zip 24 32819		2a. Mailing Address 26 5850 Lakehurst Drive Suite, Apt. #, etc. 27 Suite 150-12 City & State 28 Orlando, Florida Zip 29 32819		3. Date Incorporated or Qualified 11/29/1990	
		4. FEI Number 59-3038092		Applied For <input type="checkbox"/> Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.		<input type="checkbox"/> Yes <input 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	
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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 (NOTE: Registered Agent signature required when filing statement) DATE 3/1/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MORI, GORO 340 EAST 84TH ST., #18-M NEW YORK NY	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P TANAKA, MAMORU 300 EAST 40TH ST., #32-S NEW YORK NY	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V SUZUKI, HIROSHI 4680 SUMMER OAK ST., #4204 ORLANDO FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		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 (407) 352-9686 3/10/98

CR2E034 (10/97)