FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Division of Corporations
Tallahassee, Florida

APPROVED
AND
FILED

1995 MAY -1 AM 9:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S27668** **(0)**

1. Corporate Name
AFFORDABLE TOURS, INC.

Principal Place of Business
2805 S GOLDENROD RD
ORLANDO FL 32822

Mailing Address
2805 S GOLDENROD RD
ORLANDO FL 32822

FOR OFFICE USE ONLY

3. Date Incorporated (Chartered): 01/24/1991
3a. Date Filed Report: 05/01/1994

2. Principal Place of Business
21
2a. Mailing Address
26

Suite, Apt. #, etc.
22
Suite, Apt. #, etc.
27

City, State
23
City, State
28

Zip
24
County
25
Zip
29
County
30

4. FEI Number: 59-3046701
Applied For ☐
Not Applicable ☐

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

6. Elections Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. Does corporation has authority to issue capital stock? Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

NIU, LARRY
2805 S GOLDENROD RD
ORLANDO FL 32822

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Section 607.0505, 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. Therefore, we find the appointment as registered agent can serve as proof of the authorization of such change, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	NIU, LARRY
STREET ADDRESS	2805 S GOLDENROD RD
CITY ST ZIP	ORLANDO FL
TITLE	D
NAME	LAI, JEANNE
STREET ADDRESS	2805 S GOLDENROD RD
CITY ST ZIP	ORLANDO FL

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY ST ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY ST ZIP		
TITLE		☐ Change ☐ Addition
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NAME		
STREET ADDRESS		
CITY ST ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY ST ZIP		

14. I hereby certify that the information stated above is true and complete. Pursuant to Section 607.0505, Florida Statutes, I further certify that the corporation has complied with all requirements of Chapter 607, Florida Statutes, including, but not limited to, the filing of a corporate annual report. I understand that the filing of this report does not imply that the corporation is in good standing under Chapter 607, Florida Statutes, and that it may appear that it is not in good standing if other requirements have not been met.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0002013 CP