CORP ANNUA	N OR BEFORE 8/7/96: \$225 (IF DIS ROFIT PORATION AL REPORT	FLORIDA DEPAR Sandra B Secretar	IMENT OF STATE		
DOCUM	MENT # S669 0	60 (3)			
	TOURS OPERATORS CO	ORPORATION			
Principal Place	of Business	Mailing Address			<u>ean disha bibin alah bian bian bian ran</u>
5850 LAKE HI 150-13 ORLANDO FL US		5850 LAKE HURST DR 150-13 ORLANDO FL 32819 US		Date Incorporated or Qualified 07/15/1991	3a, Date of Last Report 04/18/1995
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For Not Applicable
Suite, Apt. #		Suite, Apt #, etc		65-0289272 5. Certificate of Status Desired	\$8.75 Additional
2		27 City & State		Cermicale of Status Desiret Lection Campaign Financing	Fee Required \$5.00 May Be
City & State	•	28		Trust Fund Contribution	Added to Fees
Zıp	Country 25	Zip 29	Country 30		Yes No
24	9. Name and Address of Curr		81 Name o	10. Name and Address of New F	
585 4 SU	ampos, ana Karla Gedeoi 150 lakehurst dr Jite 100 Rlando fl 32819		82 Street Ac 5 8	NDRE OLIVEIRA Idress (P.O. Box Number is Not Accept SO LAKEITURST	GEDEON De. Suite 150-13 El 85 Zin Code, 9
11. Pursuant to office or re	to the provisions of Sections 607.0 egistered agent, or both, in the Sh	0502 and 607.1508, Florida Statut late of Florida Such change was a bluestics of Section 607.0505 Fi		CANDO reportation submits this statement for the ation's board of directors. I hereby acceptable to the control of the contro	purpose of changing its registered pt the appointment as registered
office or re agent. I ar SIGNATURE	egistered agent, or boin, in the Sh m familiar with and accept the ob	bligations of, Section 607.0505, Fi	les, the above-named co authorized by the corpor orida Statutes.	purporation submits this statement for the ation's board of directors. Thereby acce	purpose of changing its registered of the appointment as registere
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