

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S73827** (5)

1. Corporation Name

QUICK TRAVEL, INC.



Principal Place of Business

**3760 INVERRARY DRIVE
N3P
LAUDERHILL FL 33319**

Mailing Address

**3760 INVERRARY DRIVE
N3P
LAUDERHILL FL 33319**

2. Principal Place of Business

21 500 EAST BROWARD BOULEVARD

Suite, Apt. #, etc.

22 1100

City & State

23 FT LAUDERDALE FL

Zip

24 33394

Country

25 USA

2a. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

29

Country

30

3. Date Incorporated or Qualified

08/12/1991

3a. Date of Last Report

04/27/1995

4. FEI Number

65-0280085

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**MARULANDA S., CARLOS
3760 INVERRARY DR.
N3P
LAUDERHILL FL 33319**

10. Name and Address of New Registered Agent

81 Name **MARULANDA, CARLOS A.**

82 Street Address (P.O. Box Number is Not Acceptable)
500 EAST BROWARD BOULEVARD

83 **SUITE 1100**

84 City **FT LAUDERDALE**

FL

85 Zip Code
33394

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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

Signature (Typed or Printed Name of Signer and Title of Signer)

Signature (Typed or Printed Name of Signer and Title of Signer)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE **D**
NAME **MARULANDA, CARLOS**
STREET ADDRESS **668 STANTON DRIVE**
CITY- ST- ZIP **FORT LAUDERDALE FL**

☒ DELETE

TITLE **PDC**
NAME **MARULANDA, EDGAR**
STREET ADDRESS **2684 RIVIERA COURT**
CITY- ST- ZIP **FORT LAUDERDALE FL**

☐ DELETE

TITLE **D**
NAME **MARULANDA, PABLO A**
STREET ADDRESS **18444 NW 9TH COURT**
CITY- ST- ZIP **PEMBROKE FL**

☐ DELETE

TITLE **D**
NAME **MARULANDA, CESAR**
STREET ADDRESS **694 STANTON DR**
CITY- ST- ZIP **FT. LAUDERDALE FL**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

11 TITLE **DO**

12 NAME **MARULANDA, CARLOS A.**

13 STREET ADDRESS

14 CITY- ST- ZIP

☐ Change ☐ Addition

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY- ST- ZIP

Delete

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY- ST- ZIP

DO

☒ Change ☐ Addition

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY- ST- ZIP

DO

MARULANDA, CESAR A.

☒ Change ☐ Addition

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY- ST- ZIP

**900001828839
-05/20/96--01035--011
***200.00**

☐ Change ☐ Addition

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY- ST- ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CARLOS A. MARULANDA

04-29-96

954-463-2900

Date

SG

Date

5-1-96

CR2E034 (12/95)