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CLERK OF THE STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT



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

1999 1998

DOCUMENT # S82220

1. Corporation Name
TRAVEL YOUR WAY, INC.

Principal Place of Business
5555 HOLLYWOOD BLVD
HOLLYWOOD, FL. 33021

Mailing Address
5555 HOLLYWOOD BLVD
HOLLYWOOD, FL. 33021

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
9/23/1991

4. FEI Number
59-3088341

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 owes or has paid the current year Intangible Personal Property Tax due June 30 ☒ Yes ☐ No

10. Name and Address of New Registered Agent

2. Principal Place of Business

21. 5555 HOLLYWOOD BLVD

Suite, Apt. #, etc. 203

23. HOLLYWOOD, FL

24. 33021

Country

25. BRUNARU

2a. Mailing Address

26. 5555 HOLLYWOOD BLVD

Suite, Apt. #, etc. 203

28. HOLLYWOOD, FL

29. 33021

Country

30. BRUNARU

9. Name and Address of Current Registered Agent

REIF, AVI B
5555 HOLLYWOOD BLVD
HOLLYWOOD, FL. 33021

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 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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when completing)

(DATE)

12. OFFICERS AND DIRECTORS

TITLE NAME
STREET ADDRESS
CITY, ST, ZIP
REIF, AVI B
5555 HOLLYWOOD BLVD
HOLLYWOOD, FL. 33021

TITLE NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE NAME
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY, ST, ZIP
PREIF, AVI. B
5612 HOLLYWOOD BLVD
HOLLYWOOD, FL. 33021

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY, ST, ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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. 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 is not on 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

4/23/99