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FILED
Mar 25 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # S90220 (2)
1. Corporation Name
W. B. TRAVEL, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 27433 S.R. 54 WESLEY CHAPEL FL 33543 US		Mailing Address 27433 S.R. 54 P. O. BOX 7281 WESLEY CHAPEL FL 33543 US	
2. Principal Place of Business 21 14106 7th Street Suite, Apt. #, etc. 22		2a. Mailing Address 26 14106 7th St Suite, Apt. #, etc. 27	
City & State 23 Dade City FL		City & State 28 Dade City FL	
Zip 24 33525		Country 25 PASCO	
Zip 29 33525		Country 30 PASCO	

3. Date Incorporated or Qualified 10/28/1991	
4. FEI Number 59-3100376	Applied For 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 GREENFELDER, GLEN E. 103 NORTH THIRD ST. DADE CITY FL 33525		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City	
85 Zip Code		FL	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	
NAME	NOVAK, MARK	1.2 NAME	
STREET ADDRESS	27433 S.R. 54	1.3 STREET ADDRESS	
CITY-ST-ZIP	WESLEY CHAPEL FL	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	
NAME	EDWARDS, DEBRA	2.2 NAME	
STREET ADDRESS	27433 SR 54	2.3 STREET ADDRESS	
CITY-ST-ZIP	WESLEY CHAPEL FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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)(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.

Mark Novak 2/10/98 0129224111

CR2E034 (10/97)