FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # V07664 1. Corporation Name

THE WOMEN'S TRAVEL CLUB (USA) INCORPORATED

Principal Place	of Business	Mailing Address					
21401 NE 38TH		21401 NE 38TH AVE					
AVENTURA FL 33180		AVENTURA FL 33180			DO NOT WRITE IN THIS	SPACE	
US		US	US		3. Date Incorporated or Qualifed		
					01/21/1992		
_					4 FEI Number	- Ap	plied For
2. Principal Pla	ace of Business	2a. Mailing Address	2a. Mailing Address		65-0305611	<u> </u>	t Applicable
21		26			00-000011	\$8.75 A	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	Fee Re	
22		27	-		The state of the s	\$5.00	Mov Bo
City & State		City & State	⊢ ′		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
23			28 Country				
Zip Country		Zip			This corporation owes the current year Ini Personal Property Tax.	Yes	□No
24	25		0		10. Name and Address of New Registered		
	9. Name and Address of Co	urrent Registered Agent	8	Name	10. Name and Address of the trage		
en thi	00 100		l°				
	GS INC	·	82	82 Street Address (P.O. Box Number is Not Acceptable)			
	NW 16TH STREET		_		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	<u> </u>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
FTV	AUDERDALE FL 33311		83	3			
			84	4 City		85 Zip (Code
			i	1	poration submits this statement for the purpose of on's board of directors. I hereby accept the appo	<u> </u>	
agent. La	m familiar with, and accept the t	phigations of, occiton our leader, reserv			oration submits this statement for the purpose of on's board of directors. I hereby accept the appointment of the purpose of t		
0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.	Signature, typed or printed name of register		and title if applicable. (NOTE: Registered Agent signature req		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	ORS IN 12
12.		S AND DIRECTORS	13. 1,1 TITLE		ADDITIONS/GHANGES TO SETTE	Change	☐ Addition
TITLE	D	- OELETE			. *		
NAME	STOLLER, PHYLLIS		1.2 NAME				j
STREET ADDRESS	21401 NE 38 AVE			ET ADDRESS			
CITY-ST-ZIP	AVENTURA FL		1.4 CITY-			Change	Addition
TITLE		☐ DELETE	2.1 TITLE				_
NAME			2.2 NAME				1
STREET ADDRESS			2.3 STRE	ET ADDRESS			
CITY-ST-ZIP			2. 4 CITY			☐ Change	Addition
TITLE	-	☐ DELETE	3.1 TITLE	i i		[] G	L,
NAME			3.2 NAM				
STREET ADDRESS			3.3 STRE	ET ADDRESS			
CITY-ST-ZIP	1.20		_	-ST-ZIP		[] Change	[] Addition
TITLE		[] DELETE	4.1 TITLE	■		Change	[] vooigon
NAME			4, 2 NAM	Æ			
STREET ADDRESS			4.3 STR	ET ADDRESS			
CITY-ST-ZIP	1		4.4 CITY	-ST-ZIP			F 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
TITLE		☐ DELETE	5.1 TITL			Change	Addition
NAME			5.2 NAM	E			
STREET ADDRESS	,		5.3 STR	EET ADDRESS			
1) 		5.4 CITY	-ST-ZIP			
CITY-ST-ZIP	3' 7 	☐ DELETE	6.1 TITL	E		☐ Change	☐ Addition
}		_	6.2 NAME				
NAME			6.3 STR	EET ADDRESS			

6.4 CITY-ST-ZIP

SIGNATURE:

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, with all other like empowered.

FILED

Jan 20, 1999 8:00am

Secretary of State

01-20-1999 90003 004 ***150.00