

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 # V12574 (2)

1. Corporation Name

INTRAV RECEPTIVE SERVICES, INC., A FLORIDA CORPORATION

Principal Place of Business

2909 BAY TO BAY BLVD
SUITE 109
TAMPA FL 33629
US

Mailing Address

2909 BAY TO BAY BLVD
SUITE 109
TAMPA FL 33629
US



3. Date Incorporated or Qualified

02/05/1992

3a. Date of Last Report

06/01/1995

4. FEI Number

59-3109045

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

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

KNOPKE, WILLIAM C.
2909 W. BUSCH BLVD.
SUITE 107
TAMPA FL 33618

2909 Bay To Bay Blvd
Suite 109
33629

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

2909 Bay To Bay Blvd
Suite 109

84 City

Tampa

FL

85 Zip Code

33629

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 607.0503, Florida Statutes.

SIGNATURE

[Signature]

3/26/96

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

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME KNOPKE, WILLIAM C II
STREET ADDRESS 2909 BAY TO BAY BLVD 109
CITY-ST-ZIP TAMPA FL

TITLE D ☐ DELETE
NAME LEE, BRIAN M
STREET ADDRESS 2909 BAY TO BAY BLVD 109
CITY-ST-ZIP TAMPA FL

TITLE D ☐ DELETE
NAME SCHUBERT, ROLAND W
STREET ADDRESS 2909 BAY TO BAY BLVD 109
CITY-ST-ZIP TAMPA FL

TITLE P ☐ DELETE
NAME BENFORD, GEORGE C
STREET ADDRESS 2909 BAY TO BAY BLVD 109
CITY-ST-ZIP TAMPA FL

TITLE S ☐ DELETE
NAME REMO, ARMANDO G JR
STREET ADDRESS 2909 BAY TO BAY BLVD 109
CITY-ST-ZIP TAMPA FL

TITLE B ☐ DELETE
NAME Bank
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☒ Addition
1.2 NAME Baker, Tim
1.3 STREET ADDRESS 2909 Bay To Bay Blvd 109
1.4 CITY-ST-ZIP Tampa, FL 33629

2.1 TITLE D ☐ Change ☒ Addition
2.2 NAME Braids, Olin
2.3 STREET ADDRESS 2909 Bay To Bay Blvd 109
2.4 CITY-ST-ZIP Tampa, FL 33629

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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

3/26/96

Date

813 839-5587

Daytime Phone #

CR2E034 (12/95)