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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

16701 COLLINS AVENUE N. MIAM! FL 33160

US



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V22029

(5)

Mailing Address 16701 COLLINS AVENUE

N. MIAMI FL 33180-4201

FLORIDA SUNSHINE TRAVEL AND TOURS, INC.

Secretary of State										
3. Date Incorporated or Qualified 03/18/1992	3a. Da			eport						
4. FEI Number 65-0319199	U-4/2	.0/ 1	Αp	plied For t Applicable						
5. Certificate of Status Desired				dditional						
Election Campaign Financing Trust Fund Contribution		•		May Be o Fees						
8. This corporation has liability for in Florida Statutes	tangible Yes	tax u	nder s.	199.032,						
10. Name and Address of New Reg	istered A	geni								
s (P.O. Box Number is Not Acceptable	e)									
				,						
	FL	85	Zip (ode						
alion submits this statement for the pu 's board of directors. I hereby accept	rpose of the appo	chan ointm	ging its ent as	s registered registered						
when reinstating)	DATE				_					
ADDITIONS/CHANGES TO OFFICE	RS AND				18					
		Ц¢	hange	Addition	CR2E034 (9/96)					
		□ c	hange	Addition	ပြ					

FILED

May 14 1997 8:00am

2. Principal Pla	ice of Business	28, Mailing Add	dress			4. FEI Number		Ap	oplied For	
26					65-0319199	No	Not Applicable			
Suite, Apl. #	, etc.	Suite, Apt.	#, etc.			5. Certificate of Status Desired		\$8.75 / Fee Re		
City & State		City & State	9			6. Election Campaign Financing		\$5.00	May Be	
3		28				Trust Fund Contribution		Added t		
Zφ	Country	Zip		Country		8. This corporation has liability for	intangible	a tax under s	. 199.032,	
<u> </u>	25	29	30			Florida Statutes	Yes			
	9. Name and Address of Curr	rent Registered Agent	:	- - 1		10. Name and Address of New Ro	gistered	Agent		
	MAGGIE			B1	Name					
16701 COLLINS AVENUE				82 Street Address (P.O. Box Number is Not Acceptable)						
G/F				100				<i></i>		
N. MI	IAMI FL 33180			83						
				84	City			85 Zip	Code	
		100 1005 1100 51					FL	<u>- </u>		
office or <i>r</i> ed. סלונים	∋ the provisions of Sections 607 t cistered agent, or both, in the St	3502 and 607.3508, Flo ate of Florida. Such cha	rida Statutes, th ande was author	e above rized by	e-named corp the corporat	poration submits this statement for the tion's board of directors. I hereby acce	ourpose o	η changing π pointment as	is registered realstered	
agent. Lan	I familiar with, and accept the ob	ligations of, Section 60	7.0505, Florida	Statutes			,		•	
SIGNATURE										
	Signature: typed or printed name of registered	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			nt signature requir	red when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CEDC AND	D DIDECTOR	00 IN 10	
12.	D	AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFI	JENS ANI	Change	Addition	
TLE	COX, MAGGIE	السا						CT Counties	L.J rodition	
AM	16701 COLLINS AVENUE			1.2 NAME						
STREET ADORESS	N. MIAMI FL			1.3 STREET						
OTY - ST ZIP	N. MIVMI FL			1.4 CITY - ST 2.1 TITLE	T-ZIP			Change	Addition	
litt		LJ	1	2.2 NAME	1			C. Granige	Tan you that	
AME					ADDRESS					
STREET ADDRESS			ľ	2.3 STREET						
HTLE		- 1		2.4 CITY-S 3.1 TITLE	11.711			Change	Addition	
VAME			•	3.2 NAME				مارين لي	Las Piodicon	
STREET ADDRESS				3.2 STREET	ADDDECC					
CHY+S1+Z(P				3.4. CITY-S						
III SI ZI				4.1 TITLE	N-ZIF			☐ Change	Addition	
VAMe		_		1. 2 NAME	.			•		
STREET ADDRESS				1.3 STREET	ADDRESS					
SHY-ST-ZiP				4.4 CITY-S						
TILE	·			5.1 TITLE				Change	Addition	
IAME				5 2 NAME						
SEREN ADDRESS				53 STREET	ADDRESS					
Dity-St-Ze				54 CITY-S						
HIF				6 1 TITLE		······································		☐ Change	Addition	
YAME				52 NAME						
STREET AUDITESS				5.3 STREET	ADDRESS					
City-St. ZiF				6.4 CITY - S	1-ZIP					
14. I do hereby	y certify that the information supr	hed with this filing doe	s not qualify for	the exe	mplion stated	d in Section 119.07(3)(i), Florida Statut	es. I furthe	er certify that	the	
information Lam an offi appears in	i indicated on this annual report ficer or strector of the corporation i Block 12 or Block 13 is hanged	or supplemental annua n or the receiver or trus d, or charm attachment of	poort is true a tee empowered with an address	nd acci. to exec	rate and that ute this repo	d in Section 119.07(3)(i), Florida Statut t my signature shall have the same leg rt as required by Chapter 607, Florida		is if made un and that my r	der oath; tha name	

SIGNATURE: 💹