

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Tallahassee, Florida
32399-0001

APPROVED
AND
FILED

DOCUMENT # **V27545** (5)
1. Corporation Name
CAPITOL TOURS INC.

95 MAY -1 PM 11:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailings Address

~~600 WHITETHORN DRIVE~~
~~MIAMI SPRINGS FL 33146~~

~~600 NW 63RD STREET~~
~~SUITE 4100~~
~~MIAMI FL 33100~~

Office of Approval of the Report

3. Date of Report (Month/Day/Year)	3a. Date of Last Report
04/06/1992	06/14/1994
4. FID Number	Approved For
65-0325586	Not Applicable
5. Certificate of Status (Debated)	\$8.75 Additional Fee Required
6. Election Campaign Financing (Total Cash Contributions)	\$5.00 May Be Added to Fees
8. This corporation has failed to attempt to pay under the 1994 Act	☒ No ☐ Yes

2. Principal Place of Business	2a. Mailing Address
21. 1432 W. FLAGLER ST.	26.
22. City & State	27. City & State
23. MIAMI, FL.	28.
24. 33145	29. U.S.A.
30.	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROCA, ADIS
33 WHITETHORN DRIVE
MIAMI SPRINGS FL 33166

81. Name	
82. Street Address (City, State, Zip) or P.O. Box	
83.	
84. City	FL 85. Zip

11. If subject to the provisions of the Florida Campaign Finance Statutes, this document certifies that the corporation has submitted the information for the purpose of changing its registered office to the Department of State. If the corporation has failed to attempt to pay under the 1994 Act, the corporation is liable for the payment of the fee for the appointment of a registered agent.

Signature of:

12. PS ROCA, ADIS 333 WHITETHORN DRIVE MIAMI SPRINGS FL	13. Agent Name, Address, City, State, Zip
NAME	NAME
ADDRESS	ADDRESS
CITY	CITY
STATE	STATE
ZIP	ZIP
NAME	NAME
ADDRESS	ADDRESS
CITY	CITY
STATE	STATE
ZIP	ZIP
NAME	NAME
ADDRESS	ADDRESS
CITY	CITY
STATE	STATE
ZIP	ZIP
NAME	NAME
ADDRESS	ADDRESS
CITY	CITY
STATE	STATE
ZIP	ZIP
NAME	NAME
ADDRESS	ADDRESS
CITY	CITY
STATE	STATE
ZIP	ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and is true and correct, and that the corporation has taken the necessary steps to ensure that the information is correct and that the corporation is in compliance with the provisions of the Florida Campaign Finance Statutes, and that the name appears on Block 12 or Block 13 of this report is the name of the corporation.

SIGNATURE:

Adis Roca
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-5-95 (905) 446-2055