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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V3461

(4)

GOLD TOURS, INC.

Principal Place of Busin

Mailing Address

FILED
May 08 1998 8:00am
Secretary of State



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520 S PENINS	SULA AVENUE	P.O. BOX 2233					
SUITE 311 SUITE 311 NEW SMYRNA BEACH FL 32170 NEW SMYRNA BEACH FL 3:			32170		DO NOT WRITE IN THIS SPACE		
US US					3. Date Incorporated or Qualified		
1					05/05/1992		ľ
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied F	For
21 4630	O B.KIRKMANRD		D 140.	VER D	OR 59-3124342	Not Appli	
Suite_Apt		Suite, Apt. #, etc.		<u>, , , , , , , , , , , , , , , , , , , </u>		SR 75 Addition	
22 Su'il	te 347	27			5. Certificate of Status Desired	Fee Required	1
City & State		City & State	4		6. Election Campaign Financing	\$5.00 May B	Зе
23 ORLA	INDO, FL.	28 OKLANDO	FL		Trust Fund Contribution	Added to Fees	s
24 328	Country	7(p)	Country	/	8. This corporation owes or has paid	~	e
24 Jan	[f ²] 25]		30		Personal Property Tax due June 3		
	g, Hallie Bild Addiess di Opiloli	t Hegistered Agent	81	Name	10. Name and Address of New Reg	stered Agent	
	MOS, DAYSY M		*'	Name			-
	S PENINSULA AVENUE		82	Street A	ddress (P.O. Box Number is Not Acceptable	<u> </u>	
	TE 510		83	74	OSO 5. 1/KKM/HU N	レ	
NE	W SMYRNA BEACH FL 32170		103	l Si	ille 347		
			84	City	210.100	85 Zip Code	,
) 007 4500 Florido D uol de		U	CLANIJO,	FL 328/	
office or re	egi ste red agent, or both, in the State :	≥ and 507.1508, Florida Sta tute: of Florida: Such change wa s at	s, the abov Jihorized b	e-named c y the corpc	orporation submits this statement for the puration's board of directors. I hereby accept	rpose or changing its registe the appointment as registe	sierea ered
agent. Lai	m familiar with, and accept the obliga	itions of, Section 607. 0505 , Flor	rida Statute	S			
SIGNATURE			Daniel d A.			DATE	
12.	Signature, typed or printed made of registered signs OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	13.	ent signature re	ADDITIONS/CHANGES TO OFFICE		
TOLE	D	DELETE	11 TITLE		ADDITIONS/OFFANGES TO OFFICE		Addition \$
NAME	RAMOS, DAISY M.		1.2 NAME	1		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	"
STREET ADDRESS	520 S PENINSULA AVENUE			ADDRESS	4630 S. KIRKWAN &	71). Buite 34"	7 8
CITY-ST-ZIP	NEW SMYRNA BEACH FL		1.4 CITY - 5	ST-ZIP	4630 S. KIRKMAN A CRLANDO, FL. 32	210	. \\ \\ \\ \\ \
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, se indiani/c	sarung mai tha imanthalian su mhisall wi	ur mie nimo dans bat arigida tat	THE EVENT		un Saction 114 D7/CVII FINNAS STALITAE Et	ITTOOL COMING INGLING INTOITY	Janon I

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is frue 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 frustee 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 attachingent with an address.

1-s