

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

FILED  
Jun 11 1998 8:00am  
Secretary of State

DOCUMENT # V51308

(7)

1. Corporation Name

BUENO'S TRAVEL & TOURS INC.

Principal Place of Business

Mailing Address

1435 PINES HILLS ROAD  
ORLANDO FL 32808  
US

1435 PINES HILLS ROAD  
ORLANDO FL 32808  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/16/1992

4. FEI Number

59-3136088

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

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30

9. Name and Address of Current Registered Agent

MOLINA, JULIO  
8614 BRACKENWOOD DR  
ORLANDO FL 32829

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 607.0505, Florida Statutes.

SIGNATURE

Signature of person authorized to file this report and fee (if applicable)

(Note: Registered Agent signature required when reconstituting)

DATE

12. OFFICERS AND DIRECTORS

| TITLE | NAME          | STREET ADDRESS        | CITY - ST - ZIP | DELETE                   |
|-------|---------------|-----------------------|-----------------|--------------------------|
| D     | BUENO, JULIO  | 1435 PINES HILLS ROAD | ORLANDO FL      | <input type="checkbox"/> |
| D     | BUENO, MIRIAM | 1435 PINES HILLS ROAD | ORLANDO FL      | <input type="checkbox"/> |
|       |               |                       |                 | <input type="checkbox"/> |
|       |               |                       |                 | <input type="checkbox"/> |
|       |               |                       |                 | <input type="checkbox"/> |
|       |               |                       |                 | <input type="checkbox"/> |
|       |               |                       |                 | <input type="checkbox"/> |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| 11 TITLE | 12 NAME | 13 STREET ADDRESS | 14 CITY - ST - ZIP | 21 TITLE | 22 NAME | 23 STREET ADDRESS | 24 CITY - ST - ZIP | 31 TITLE | 32 NAME | 33 STREET ADDRESS | 34 CITY - ST - ZIP | 41 TITLE | 42 NAME | 43 STREET ADDRESS | 44 CITY - ST - ZIP | 51 TITLE | 52 NAME | 53 STREET ADDRESS | 54 CITY - ST - ZIP | 61 TITLE | 62 NAME | 63 STREET ADDRESS | 64 CITY - ST - ZIP |
|----------|---------|-------------------|--------------------|----------|---------|-------------------|--------------------|----------|---------|-------------------|--------------------|----------|---------|-------------------|--------------------|----------|---------|-------------------|--------------------|----------|---------|-------------------|--------------------|
|          |         |                   |                    |          |         |                   |                    |          |         |                   |                    |          |         |                   |                    |          |         |                   |                    |          |         |                   |                    |
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|          |         |                   |                    |          |         |                   |                    |          |         |                   |                    |          |         |                   |                    |          |         |                   |                    |          |         |                   |                    |
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|          |         |                   |                    |          |         |                   |                    |          |         |                   |                    |          |         |                   |                    |          |         |                   |                    |          |         |                   |                    |

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 registered agent 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.

CR2E034 (10/97)