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May 08 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # V58863 (4)  
1. Corporation Name  
LKS TRAVEL, INC.



Principal Place of Business  
8184 GLADES ROAD  
BOCA RATON FL 33434  
US

Mailing Address  
8184 GLADES ROAD  
BOCA RATON FL 33434  
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
21 230 Royal Palm Way  
Suite, Apt. #, etc. 211  
City & State  
23 Palm Beach  
Zip Country  
24 33480 25 U.S.A.

2a. Mailing Address  
26 P.O. Box 810653  
Suite, Apt. #, etc.  
27  
City & State  
28 Boca Raton, FL  
Zip Country  
29 33481 30 U.S.A.

3. Date Incorporated or Qualified  
08/20/1992

4. FEI Number  
65-0351837  
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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

LOWMAN, STEPHEN G.  
8184 GLADES ROAD  
BOCA RATON FL 33434

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
230 Royal Palm Way, #211  
83  
84 City Palm Beach FL 85 Zip Code 33480

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 *Stephen G. Lowman Pres.* *Stephen G. Lowman, President* DATE *April 28, 1998*

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
DPST	LOWMAN, STEPHEN G.	821 WESTWIND DR	N PALM BCH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 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 *Stephen G. Lowman Pres.* *Stephen G. Lowman, President* DATE *4/28/98* *561-338-8772*

CR2E034 (10/97)