

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # V60111 (4)

1. Corporation Name

ART OF TRAVEL INCORPORATION



Principal Place of Business

7514 SUGAR BEND DR
SUITE 204
ORLANDO FL 32819
US

Mailing Address

7514 SUGAR BEND DR.
SUITE 204
ORLANDO FL 32819-7212
US

3. Date Incorporated or Qualified

08/24/1992

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SANTOS, MAURO C., ESQUIRE
25 S.E. SECOND AVE.
SUITE 740
MIAMI FL 33131

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 607.0504, Florida Statutes.

SIGNATURE

Signature of the registered agent, if the agent is not the corporation.

Signature of the corporation, if the corporation is the agent.

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
A'VILA, JOAO S.
STREET ADDRESS
RUA "I" 446, JARDIM ATLANTICO
CITY-ST-ZIP
ARACAJU SE BR

TITLE ☐ DELETE

NAME
RADESCA, JAIR V.
STREET ADDRESS
RUI CLODOMIRO AMAZONAS 906
CITY-ST-ZIP
SAO PAULO CE

TITLE ☐ DELETE

NAME
RADESCA, VALERIA L.
STREET ADDRESS
RUI CLODOMIRO AMAZONAS 960
CITY-ST-ZIP
SAO PAULO CE

TITLE ☐ DELETE

NAME
AVILA, DIANA
STREET ADDRESS
RUA "I" 446 JARDIM ATLANTICO
CITY-ST-ZIP
ARACAJU SE BR

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 13 if changed, or on an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAIRO V. RADESCA

April 15, 1996 (407) 352-2190

CR2E034 (12/95)