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

CITY-ST-ZIP

FILED **PROFIT** Jun 01 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ^{*} ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #** S.B. TRAVEL, INC. Principal Place of Business Mailing Address 1414 BRICKELL AVE 1414 BRICKELL AVE MIAMI FL 33131-3406 MIAMI FL 33131-3406 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/01/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 65-0362002 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Country Country B. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent JAINE PAMPOUNA JAIME PAMPOLINA 248-BRICKELL-AVE 82 Street Address (P.O. Box Number is Not Acceptable) SUITE-010 MIAMILEL 23191 83 715 N.W. 177th. AVE 84 City 33029 PEMBROKE PINES 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. I am familiar with any accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Hegistered Agont signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 11 TITLE Change Addition DE BARROS, LUIS OLIVEIRA NAME 12 NAME 1414 BRICKELL AVE STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131 1.4 C/TY - ST - ZIP TITLE DELETE 21 TITLE Change Addition CARDOSO, SERGIO L. NAME 2.2 NAME 1414 BRICKELL ABVE STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33131 CITY-ST-ZIP 2.4 CITY-\$1-ZIP TITLE DELETE 3.1 TITLE Change ■ Addition NAME MACHADO, PAULO 3.2 NAME 1414 BRICKELL AVE STREET ADDRESS 3.3 STREFT ADDRESS **MIAMI FL 33131** CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 THILE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - S1 - ZIP DELETE TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 61 TITLE Change Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP 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 supplement annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the compared to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an appear of the same legal effect as if made under eath; that I am an officer or director of the corporation or the compared to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an appear of the corporation of the c

Alba lan