

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000000023

FILED
Apr 25, 2006
Secretary of State

Entity Name: TRAVELZOO INC.

Current Principal Place of Business:

590 MADISON AVE., 21ST FLOOR
NEW YORK, NY 10022

New Principal Place of Business:

Current Mailing Address:

590 MADISON AVE., 21ST FLOOR
NEW YORK, NY 10022

New Mailing Address:

800 W. EL CAMINO REAL
180
MOUNTAIN VIEW, CA 94040

FEI Number: 36-4415727

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: BARTEL, RALPH
Address: 509 MADISON AVE., 21ST FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: EV () Delete
Name: BARTEL, HOLGER
Address: 509 MADISON AVE., 21ST FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: C () Delete
Name: SU, LISA
Address: 509 MADISON AVE., 21ST FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: D () Delete
Name: EHRlich, DAVID J
Address: 509 MADISON AVE., 21ST FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: D () Delete
Name: NEALE-MAY, DONOVAN
Address: 509 MADISON AVE., 21ST FLOOR
City-St-Zip: NEW YORK, NY 10022

Title: D () Delete
Name: URSo, KELLY M
Address: 509 MADISON AVE., 21ST FLOOR
City-St-Zip: NEW YORK, NY 10022

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LISA SU

CAO

04/25/2006

Electronic Signature of Signing Officer or Director

Date