

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F79263

FILED
Apr 20, 2004
Secretary of State

Entity Name: CAPITOL TRAVEL & TOURS INTERNATIONAL INC.

Current Principal Place of Business:

3099 W. 4TH AVE.
HIALEAH, FL 33012

New Principal Place of Business:

5420 W 16 AVE.
HIALEAH, FL 33012

Current Mailing Address:

3099 W. 4TH AVE.
HIALEAH, FL 33012

New Mailing Address:

5420 W 16 AVE
HIALEAH, FL 33012

FEI Number: 59-2195710

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, BLANCA M.
2030 S OCEAN DRIVE
HALLANDALE, FL 33099 US

Name and Address of New Registered Agent:

WILLIAM GONZALEZ
14499 SW 48 CT
MIRAMAR, FL 33027 US

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: WILLIAM GONZALEZ

04/20/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: GARCIA, BLANCA M,
Address: 2030 S OCEAN DRIVE
City-St-Zip: HALLANDALE, FL 33099

Title: VP () Delete
Name: GONZALEZ, DANIA R,
Address: 14499 S.W. 48TH CT
City-St-Zip: MIRAMAR, FL 33027

Title: T () Delete
Name: GONZALEZ, WILLIAM E
Address: 14499 S.W. 48TH CT
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PS (X) Change () Addition
Name: GONZALEZ, WILLIAM,
Address: 14499 SW 48 CT
City-St-Zip: MIRAMAR, FL 33027

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 Section 119.07(3)(i), 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: WILLIAM GONZALEZ

PD

04/20/2004

Electronic Signature of Signing Officer or Director

Date