## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F79263

GONZALEZ, WILLIAM E

14499 S.W. 48TH CT

MIRAMAR, FL 33027

Name:

Address:

City-St-Zip:

FILED Feb 02, 2005 Secretary of State

Entity Name: CAPITOL TRAVEL & TOURS INTERNATIONAL INC. **Current Principal Place of Business: New Principal Place of Business:** 5420 W 16 AVE. HIALEAH, FL 33012 **Current Mailing Address: 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: 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition GONZALEZ, WILLIAM, GONZALEZ, WILLIAM E Name: Name: 14499 SW 48 CT 14499 SW 48 CT Address: Address: City-St-Zip: MIRAMAR, FL 33027 City-St-Zip: MIRAMAR, FL 33027 Title: VΡ Title: VΡ () Delete (X) Change ( ) Addition GONZALEZ, DANIA R Name: GONZALEZ, DANIA R, Name: 14499 S.W. 48TH CT 14499 S.W. 48TH CT Address: Address: MIRAMAR, FL 33027 MIRAMAR, FL 33027 City-St-Zip: City-St-Zip: Title: ( ) Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: WILLIAM GONZALEZ PS 02/02/2005