2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# P04000137336

Entity Name: FANTASY VACATION OF USA, INC.

Current Principal Place of Business:

5401 COLLINS AVE
CU11B
MIAMI BEACH, FL 33140

New Principal Place of Business:

5901 NW 151 ST
SUITE 103
MIAMI LAKES, FL 33014

Current Mailing Address:

5401 COLLINS AVE
CU11B
MIAMI BEACH, FL 33140

New Mailing Address:

5901 NW 151 ST
SUITE 103
MIAMI LAKES, FL 33014

FEI Number: 75-3169561 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SANCHO QUINTERO, JENILEISS
5401 COLLINS AVE
SUITE CU11B
MIAMI BEACH, FL 331405525 US

Name and Address of New Registered Agent:

SANCHO QUINTERO, JENILEISS
5901 NW 151 ST
SUITE 103
MIAMI LAKES, FL 33014 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: JENILEISS SANCHO QUINTERO 04/30/2007
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VP ( ) Delete
Name: ZALDIVAR, MIGUEL
Address: 15242 NW 88 PL
City-St-Zip: MIAMI LAKES, FL 33018

Title: P ( ) Delete
Name: SANCHO QUINTERO, JENILEISS
Address: 5401 COLLINS AVE SUITE CU11B
City-St-Zip: MIAMI BEACH, FL 331405525

Title: VP ( ) Delete
Name: COHEN, VIOLETA
Address: 1311 NW 19TH PL
City-St-Zip: CAPE CORAL, FL 33909

Title: ST (X) Delete
Name: ORTEGA, GUILLERMO
Address: 5333 COLLINS AVE APT 406
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ST (X) Change ( ) Addition
Name: ORTEGA, GUILLERMO
Address: 5901 NW 151 ST SUITE 103
City-St-Zip: MIAMI LAKES, FL 33014

Title: P (X) Change ( ) Addition
Name: SANCHO QUINTERO, JENILEISS
Address: 5901 NW 151 ST SUITE 103
City-St-Zip: MIAMI LAKES, FL 33014

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 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: JENILEISS SANCHO QUINTERO P 04/30/2007
Electronic Signature of Signing Officer or Director Date