

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000108129

FILED
Mar 03, 2009
Secretary of State

Entity Name: SUMMER VACATIONS SERVICES, INC.

Current Principal Place of Business:

13434 SW 90 TERR
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

13434 SW 90 TERR
MIAMI, FL 33186

New Mailing Address:

FEI Number: 20-5477629

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JIMENEZ, GONZALO F
13434 SW 90 TERR
MIAMI, FL 33186 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: P () Delete
Name: ROJAS, CARLOS
Address: 7812 NW 164TH ST.
City-St-Zip: MIAMI, FL 33016

Title: VP () Delete
Name: JIMENEZ, GONZALO F
Address: 13434 SW 90 TERR
City-St-Zip: MIAMI, FL 33186

Title: VP (X) Delete
Name: JIMENEZ, GONZALO F JR
Address: 6840 NW 179 ST. #105
City-St-Zip: HIALEAH, FL 33015

Title: VP (X) Delete
Name: ISASI, KARLA
Address: 262 GOLF VIEW DR
City-St-Zip: TEQUESTA, FL 33469

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JIMENEZ, GONZALO F
Address: 13434 SW 90TH TERR
City-St-Zip: MIAMI, FL 3186 US

Title: VP (X) Change () Addition
Name: ISASI, KARLA
Address: 262 GOLF VIEW DR
City-St-Zip: TEQUESTA, FL 33469 US

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: GONZALO F JIMENEZ

P

03/03/2009

Electronic Signature of Signing Officer or Director

_____ Date