

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000088996

FILED
May 04, 2005
Secretary of State

Entity Name: CHRISTIAN TRAVEL OPPORTUNITIES, INC.

Current Principal Place of Business:

1490 BANKS RD
MARGATE, FL 33063

New Principal Place of Business:

Current Mailing Address:

1490 BANKS RD
MARGATE, FL 33063

New Mailing Address:

624 HOLLY SPRINGS RD
SUITE 333
HOLLY SPRINGS, NC 27540

FEI Number: 65-0869489

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CIOFFI, VINCENT
1490 BANKS RD
MARGATE, FL 33063 US

Name and Address of New Registered Agent:

CIOFFI, VINCENT F
624 HOLLY SPRINGS RD
SUITE 333
HOLLY SPRINGS, NC, FL 27540 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: VINCENT F CIOFFI

05/04/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CIOFFI, VINCENT
Address: 1490 BANKS RD
City-St-Zip: MARGATE, FL 33063

Title: D () Delete
Name: CIOFFI, ROBIN
Address: 1490 BANKS RD
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CIOFFI, VINCENT
Address: 624 HOLLY SPRINGS RD SUITE 333
City-St-Zip: HOLLY SPRINGS, NC 33063

Title: D (X) Change () Addition
Name: CIOFFI, ROBIN
Address: 624 HOLLY SPRINGS RD 333
City-St-Zip: HOLLY SPRINGS, NC 27540

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: VINCENT F CIOFFI

D

05/04/2005

Electronic Signature of Signing Officer or Director

Date