

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 239549

FILED  
Aug 21, 2005  
Secretary of State

**Entity Name:** OFFICIAL INFORMATION CENTER, INC. AND TRAVEL AGENCY

**Current Principal Place of Business:**

1000 QUAYSIDE TERR  
TOWER 1 #902  
MIAMI, FL 33138

**New Principal Place of Business:**

**Current Mailing Address:**

1000 QYASIDE TERRACE  
TOWER 1/#902  
MIAMI, FL 331382220 US

**New Mailing Address:**

**FEI Number:** 59-1022043      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BLUMENKRANZ, LEONA F.  
1000 QUAYSIDE TERRACE  
TOWER 1/#902  
MIAMI, FL 331382220 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BLUMENKRANZ, HERMAN  
Address: 1000 QUASIDE TERRACE TOWER 1-#902  
City-St-Zip: MIAMI, FL 331382220

Title: T ( ) Delete  
Name: ACKERMAN, STEVEN  
Address: 7328 SW 48 ST  
City-St-Zip: MIAMI, FL 33155

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: STEVEN ACKERMAN

T

08/21/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date