# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jan 31, 2004**
**Secretary of State**

DOCUMENT# 343466

**Entity Name:** LORRAINE TRAVEL SCHOOL, INC.

**Current Principal Place of Business:**

377 ALHAMBRA CIR
CORAL GABLES, FL 331349005 US

**New Principal Place of Business:**

377 ALHAMBRA CIR
CORAL GABLES, FL 331345003 US

**Current Mailing Address:**

377 ALHAMBRA CIR
CORAL GABLES, FL 331349005 US

**New Mailing Address:**

377 ALHAMBRA CIR
CORAL GABLES, FL 331345003 US

**FEI Number: 59-2576261** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

GUITERAS,JOHN
377 ALHAMBRA CIR
CORAL GABLES, FL 33134 US

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

GUITERAS,JOHN R
377 ALHAMBRA CIR
CORAL GABLES, FL 331345003 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: JOHN R. GUITERAS 01/31/2004
Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete
Name: GUITERAS,JOHN,
Address: 377 ALHAMBRA CIR
City-St-Zip: CORAL GABLES, FL

Title: D ( ) Delete
Name: GUITERAS,LUISA,
Address: 377 ALHAMBRA CIR
City-St-Zip: CORAL GABLES, FL

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

Title: PD (X) Change ( ) Addition
Name: GUITERAS,JOHN,
Address: 377 ALHAMBRA CIR
City-St-Zip: CORAL GABLES, FL 331345003 US

Title: D (X) Change ( ) Addition
Name: GUITERAS,LUISA,
Address: 377 ALHAMBRA CIR
City-St-Zip: CORAL GABLES, FL 331345003 US

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: JOHN R. GUITERAS PD 01/31/2004
Electronic Signature of Signing Officer or Director Date