


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Apr 19, 2004 08:00 AM
Secretary of State**

DOCUMENT # 585413	
1. Entity Name HERB SUSSMAN'S WORLD TRAVEL, INC.	

Principal Place of Business 221 SEABREEZE BOULEVARD DAYTONA BEACH, FL 32118-4025	Mailing Address 221 SEABREEZE BOULEVARD DAYTONA BEACH, FL 32118-4025
--	--

DO NOT WRITE IN THIS SPACE

81410- / 666666 F&

03192004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1872559	Applied For <input type="checkbox"/> Not Applicable
------------------------------------	--

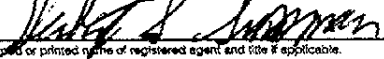
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	---------------------------------------

6. Name and Address of Current Registered Agent

**SUSSMAN, HERBERT S.
221 SEABREEZE BOULEVARD
DAYTONA BEACH, FL**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: 	DATE: 4/13/04
--	----------------------

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	--

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P SUSSMAN, HERBERT 221 SEABREEZE BLVD. DAYTONA BEACH, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

000000120053
04/19/04-80119-024 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other info empowered.

SIGNATURE: 	DATE: 4/13/04	Daytime Phone #: 386-253-6731
--	----------------------	--------------------------------------