2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000005499

Entity Name: TRAVELEX INC.

City-St-Zip: OMAHA, NE 68164

FILED Jan 28, 2004 Secretary of State

Current Principal Place of Business:		New Princ	New Principal Place of Business:	
	LAZA E ST., 15TH FL D ONTARIO M5C 2W1, ON M5C 2W	/1 CA		
Current M	lailing Address:	New Maili	New Mailing Address:	
	LAZA E ST., 15TH FL D ONTARIO M5C 2W1, ON M5C 2W	/1 CA		
FEI Number	: 13-0598590 FEI Number Applied Fo	or () FEI Number Not App	licable () Certificate of Status Desired ()	
Name and	Address of Current Registered Ag	gent: Name and	Address of New Registered Agent:	
1200 SOU PLANTATI	PORATION SYSTEM TH PINE ISLAND ROAD ON, FL 33324 US named entity submits this statement	for the purpose of changing i	ts registered office or registered agent, or both,	
in the State	e of Florida.			
SIGNATU	RE:			
	Electronic Signature of Registe	ered Agent	Date	
Election Car	mpaign Financing Trust Fund Contribution	ı ().		
OFFICER	S AND DIRECTORS:	ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	P () Delete HORNE, ANTHONY 1000 FRANKLIN AVE STE. 100 GARDEN CITY, NY 11530	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () Delete BRANDT, MIKE 100 YONKE ST 14 FLOOR TORONTO, ONTARIO, CN	Title: Name: Address: City-St-Zip:	S (X) Change () Addition VERASAMY, RICHARD 100 YONKE ST 14 FLOOR TORONTO, ONTARIO, CN M5C2W1 CA	
Title: Name: Address: City-St-Zip:	D () Delete PAINTER, DAVID THORPE WOOD PETERBOROUGH, ENGLAND,	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete NIELD, CHRIS THORPE WOOD PETERBOROUGH, ENGLAND,	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	V () Delete AMBROSE, MIKE 2121 NORTH 117 AVENUE	Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: RICHARD VERASAMY CFO 01/28/2004