

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003193

FILED  
Feb 11, 2004  
Secretary of State

Entity Name: TRAVELSAVERS, INC.

**Current Principal Place of Business:**

71 AUDREY AVENUE  
OYSTER BAY, NY 11771

**New Principal Place of Business:**

**Current Mailing Address:**

71 AUDREY AVENUE  
OYSTER BAY, NY 11771

**New Mailing Address:**

FEI Number: 13-2689961      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MAZZA, AMERIGO  
Address: 71 AUDREY AVENUE  
City-St-Zip: OYSTER BAY, NY 11771

Title: S ( ) Delete  
Name: RUSSO, GEORGE  
Address: 71 AUDREY AVENUE  
City-St-Zip: OYSTER BAY, NY 11771

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: PRES (X) Change ( ) Addition  
Name: MAZZA, AMERIGO  
Address: 71 AUDREY AVENUE  
City-St-Zip: OYSTER BAY, NY 11771

Title: SEC (X) Change ( ) Addition  
Name: RUSSO, GEORGE  
Address: 71 AUDREY AVENUE  
City-St-Zip: OYSTER BAY, NY 11771

Title: VP ( ) Change (X) Addition  
Name: PERITZ, CURTIS  
Address: 71 AUDREY AVENUE  
City-St-Zip: OYSTER BAY, NY 11771

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: CURTIS PERITZ

VP

02/11/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date