2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2006
Secretary of State

DOCUMENT# F05000002574

Entity Name: SAGA HOLIDAYS (USA) INC.

Current Principal Place of Business:

THE SAGA BUILDING, ENBROOK PARK
FOLKESTONE, KENT
CT20 3SE ENGLAND, OC

New Principal Place of Business:

THE SAGA BUILDING
ENBROOK PARK
FOLKESTONE, KENT, UK CT20 3SE UK

Current Mailing Address:

THE SAGA BUILDING, ENBROOK PARK
FOLKESTONE, KENT
CT20 3SE ENGLAND, OC

New Mailing Address:

THE SAGA BUILDING
ENBROOK PARK
FOLKESTONE, KENT, UK CT20 3SE UK

FEI Number: 47-0953099 **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: DP ( ) Delete
Name: STUART MICHAEL HOWAR, D
Address: CLONMORE, SEAL HOLLOW ROAD, SEVENOAKS
City-St-Zip: TN13 3SF, ENGLAND,

Title: DST ( ) Delete
Name: JOHN MICHAEL PARKER,
Address: 9 CHILTERN WAY, TONBRIDGE
City-St-Zip: TN9 1NQ ENGLAND,

Title: D ( ) Delete
Name: CHRISTOPHER DAVID SI, MMONDS
Address: TREHEATHIE, IFFIN LANE, CANTERBURY
City-St-Zip: CTR 7BE ENGLAND, OC

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: HOWARD, STUART M MR.
Address: CLONMORE, SEAL HOLLOW ROAD,
City-St-Zip: SEVENOAKS, UK TN13 3SF UK

Title: DST (X) Change ( ) Addition
Name: PARKER, JOHN M MR.
Address: 9 CHILTERN WAY,
City-St-Zip: TONBRIDGE, UK TN9 1NQ UK

Title: D (X) Change ( ) Addition
Name: SIMMONDS, CHRISTOPHER D MR.
Address: TREHEATHIE, IFFIN LANE,
City-St-Zip: CANTERBURY, UK CTR 7BE UK

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 M. PARKER DST 04/12/2006

Electronic Signature of Signing Officer or Director Date