

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000000273

FILED  
Sep 06, 2011  
Secretary of State

**Entity Name:** LUXE TRAVEL MANAGEMENT INC.

**Current Principal Place of Business:**

16450 BAKE PARKWAY, SUITE 100  
IRVINE, CA 92618

**New Principal Place of Business:**

**Current Mailing Address:**

16450 BAKE PARKWAY, SUITE 100  
IRVINE, CA 92618

**New Mailing Address:**

**FEI Number:** 27-1025481

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GREEN, CRYSTAL  
299 CAMINO GARDENS BLVD., SUITE 200  
BOCA RATON, FL 33432 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

**OFFICERS AND DIRECTORS:**

**Title:** PC  
**Name:** CARTER, CRAIG G  
**Address:** 53 CONOCIDO  
**City-St-Zip:** SAN CLEMENTE, CA 92673

**Title:** SD  
**Name:** NORD, RICHARD  
**Address:** 16450 BAKE PARKWAY, SUITE 100  
**City-St-Zip:** IRVINE, CA 92618

**Title:** CFO  
**Name:** ABOODI-DALLAL, LILI  
**Address:** 1508 GREENFIELD AVE #305  
**City-St-Zip:** LOS ANGELES, CA 90025

I hereby 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 all other like empowered.

**SIGNATURE:** CRAIG G CARTER

PC

09/06/2011

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

\_\_\_\_\_  
Date