2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2005
Secretary of State

DOCUMENT# F98000005724

Entity Name: AGORA TRAVEL, INC.

Current Principal Place of Business:

235 NE 4TH AVE., STE. 102
DEL RAY BEACH, FL 33483

New Principal Place of Business:

Current Mailing Address:

235 NE 4TH AVE., STE. 102
DEL RAY BEACH, FL 33483

New Mailing Address:

FEI Number: 52-2108305 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DEFILIPPIS, MICHELLE
7200 NW SECOND AVE., NO. 59
BOCA RATON, FL 33487 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: D ( ) Delete
Name: BONNER, WILLIAM
Address: 14 WEST MOUNT VERNON PL.
City-St-Zip: BALTIMORE, MD 21201

Title: D ( ) Delete
Name: FORD, MARK
Address: 14 WEST MOUNT VERNON PL.
City-St-Zip: BALTIMORE, MD 21201

Title: ST ( ) Delete
Name: NORIN, MYLES
Address: 14 WEST MOUNT VERNON PL.
City-St-Zip: BALTIMORE, MD 21201

Title: V ( ) Delete
Name: DEFILIPPIS, MICHELLE
Address: 7200 NW SECOND AVE., NO. 59
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: MICHELE DEFILIPPIS V 04/01/2005

Electronic Signature of Signing Officer or Director — Date