

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000005493

FILED
Apr 28, 2006
Secretary of State

Entity Name: TRAVELPRO INTERNATIONAL OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

700 BANYAN TRAIL
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

700 BANYAN TRAIL
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 59-2438110 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

EARLEY, MELINDA CFO
700 BANYAN TRAIL
BOCA RATON, FL 33431 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: CEO () Delete
Name: BALLIS, KIMON
Address: 700 BANYAN TRAIL
City-St-Zip: BOCA RATON, FL 33431

Title: S () Delete
Name: EARLEY, MELINDA
Address: 700 BANYAN TRAIL
City-St-Zip: BOCA RATON, FL 33431

Title: DAS () Delete
Name: PETRILLO, PETER
Address: 345 PARK AVENUE 41ST FLOOR
City-St-Zip: NEW YORK, NY 10154

Title: CD () Delete
Name: SANDERS, LEONARD
Address: 4875 DES GRANDES PRAIRIES BLVD.
City-St-Zip: MONTREAL, QUEBEC, CANADA,

Title: D (X) Delete
Name: WIERCK, RYAN
Address: 345 PARK AVE 41ST FLOOR
City-St-Zip: NEW YORK, NY 10154

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: BALLIS, KIMON MR
Address: 16166 VILLA VIZCAYA PLACE
City-St-Zip: DELARAY BEACH, FL 33446

Title: S (X) Change () Addition
Name: EARLEY, MELINDA MS
Address: 1588 ARABIAN DRIVE
City-St-Zip: LOXAHATCHEE, FL 33470

Title: DAS (X) Change () Addition
Name: LAFORGE, ROGER MR
Address: 700 BANYAN TRAIL
City-St-Zip: BOCA RATON, FL 33431

Title: CD (X) Change () Addition
Name: LAFORGE, ANDRE MR
Address: 700 BANYAN TRAIL
City-St-Zip: BOCA RATON, FL 33431

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 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: MELINDA EARLEY

CFO

04/28/2006

Electronic Signature of Signing Officer or Director

_____ Date