

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Apr 09, 2007 8:00 am
Secretary of State**

04-09-2007 90049 005 ***158.75

DOCUMENT # F99000005493		
1. Entity Name TRAVELPRO INTERNATIONAL OF SOUTH FLORIDA, INC.		

Principal Place of Business 700 BANYAN TRAIL BOCA RATON, FL 33431	Mailing Address 700 BANYAN TRAIL BOCA RATON, FL 33431
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
EARLEY, MELINDA CFO 700 BANYAN TRAIL BOCA RATON, FL 33431		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL	Zip Code

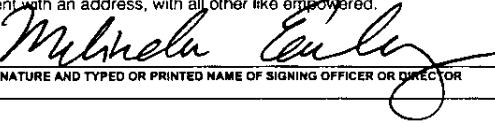
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO BALLIS, KIMON MR 16166 VILLA VIZCAYA PLACE DELARAY BEACH, FL 33446	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRACE Kurows KA 15556 Glencrest Ave Delray Beach, FL 33446
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S EARLEY, MELINDA MS 1588 ARABIAN DRIVE LOXAHATCHEE, FL 33470	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVID GRANT 700 BANYAN Trail BOCA RATON, FL 33431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAS LAFORGE, ROGER MR 700 BANYAN TRAIL BOCA RATON, FL 33431	TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO JACKIE M. Miller 7001 N.W. 70th ST PARKLAND, FL 33067
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD LAFORGE, ANDRE MR 700 BANYAN TRAIL BOCA RATON, FL 33431	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director of Finance PAUL HAGGARD 3848 SPANISH OAK PT DAVIE, FL 33328
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
4-4-07 561-998-2824
Date Daytime Phone #