2006, FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # G39839 1. Entity Name J & J TRAVEL, INC. Principal Place of Business Malling Address 2496 SW 8TH ST 2496 SW 8TH ST MIAMI, FL 33135 MIAMI, FL 33135 บร No Chg-P CR2E034 (11/05) 01162006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2304531 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent GONZALEZ, JOSE LUIS DO NOT WRITE 9032 SW 78TH PL MIAMI, FL 33156 IN THIS SPACE 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 signalure required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ππε GONZALEZ, JOSE LUIS NAME STREET ADORESS 9032 S W 78 PL CITY-ST-ZIP MIAMI, FL 33156 TITLE NAME OLSZYK, CEDALIA C U00000471102 03/28/06-80041-009 150.00 STREET ADDRESS 9032 S W 78 PL CITY-ST-ZIP MIAMI, FL 33156 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ACCRESS City-ST-719 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZYP 12. I hereby certify that the information supplied with this filling 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.

CEDALIA OLSZYK

NTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED

Mar 17, 2006 08:00 AM

(305) 643-661 b