

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G80696

FILED
Mar 04, 2004
Secretary of State

Entity Name: INTERCONTINENTAL TRAVEL AGENCY, INC.

Current Principal Place of Business:

3332 N.E. 33RD ST.
FT. LAUDERDALE, FL 333087133

New Principal Place of Business:

Current Mailing Address:

3332 N.E. 33RD ST.
FT. LAUDERDALE, FL 333087133

New Mailing Address:

FEI Number: 59-2348367

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TIBBETTS, SALLY
3332 NE 33RD ST.
FORT LAUDERDALE, FL 33308 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: P () Delete
Name: TIBBETTS, SALLY
Address: 3332 NE 33RD ST.
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: VP () Delete
Name: FERREEIRA, MILTON
Address: 200 SOUTH BIRCH RD.
City-St-Zip: FORT LAUDERDALE, FL 33316

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SALLY TIBBETTS

PRES

03/04/2004

Electronic Signature of Signing Officer or Director

Date