

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H53690

FILED  
Jan 13, 2004  
Secretary of State

Entity Name: THE TRAVEL TOUCH, INC.

## Current Principal Place of Business:

2497 BAY ISLE DRIVE  
WESTON, FL 33327

## New Principal Place of Business:

## Current Mailing Address:

2497 BAY ISLE DRIVE  
WESTON, FL 33327

## New Mailing Address:

FEI Number: 59-2700833

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LEVINE, BONNIE  
20846 NE 32 AVE  
AVENTURA, FL 33180 US

## Name and Address of New Registered Agent:

LEVINE, BONNIE B OWNER  
2497 BAY ISLE DRIVE  
WESTON, FL 33327 US

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: BONNIE B LEVINE

01/13/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LEVINE, LINDA E.,  
Address: 2716 KINSINGTON CIR  
City-St-Zip: WESTON, FL 33326

Title: ST ( ) Delete  
Name: LEVINE, BONNIE,  
Address: 20846 NE 32 AVENUE  
City-St-Zip: AVENTURA, FL 33180

Title: V ( ) Delete  
Name: LEVINE, ROY,  
Address: 20846 NE 32 AVENUE  
City-St-Zip: AVENTURA, FL 33180

Title: V ( ) Delete  
Name: LEVINE, BARRY,  
Address: 2716 KINSINGTON CIR  
City-St-Zip: WESTON, FL 33326

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: LEVINE, LINDA E PRES  
Address: 2742 KINSINGTON CIR  
City-St-Zip: WESTON, FL 33332

Title: ST (X) Change ( ) Addition  
Name: LEVINE, BONNIE B SEC/TR  
Address: 2497 BAY ISLE DRIVE  
City-St-Zip: WESTON, FL 33327

Title: V (X) Change ( ) Addition  
Name: LEVINE, ROY L V/P  
Address: 2497 BAY ISLE DRIVE  
City-St-Zip: WESTON, FL 33327

Title: V (X) Change ( ) Addition  
Name: LEVINE, BARRY L V/P  
Address: 2742 KINSINGTON CIR  
City-St-Zip: WESTON, FL 33332

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: BONNIE B LEVINE

S/T

01/13/2004

Electronic Signature of Signing Officer or Director

Date