

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K04995

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: A PLACE FOR TRAVEL, INC.

**Current Principal Place of Business:**

2353 SW 4 ST  
MIAMI, FL 33135 US

**New Principal Place of Business:**

**Current Mailing Address:**

% HENRY CABAUY  
2353 SW 4TH ST  
MIAMI, FL 33135

**New Mailing Address:**

C/O HENRY CABAUY  
2353 SW 4 ST  
MIAMI, FL 33135 US

FEI Number: 65-0023001

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CABAUY, HENRY  
2353 SW 4TH ST  
MIAMI, FL 33135 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: PTD ( ) Delete  
Name: CABAUY, HENRY  
Address: 2353 SW 4TH ST  
City-St-Zip: MIAMI, FL

Title: VSD ( ) Delete  
Name: CABAUY, MARIA CRISTINA  
Address: 2353 SW 4TH ST  
City-St-Zip: MIAMI, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PTD (X) Change ( ) Addition  
Name: CABAUY, HENRY  
Address: 2353 SW 4TH ST  
City-St-Zip: MIAMI, FL 33135 US

Title: VSD (X) Change ( ) Addition  
Name: CABAUY, MARIA CRISTINA  
Address: 2353 SW 4TH ST  
City-St-Zip: MIAMI, FL 33135 US

I hereby certify that the information supplied with this filing does not qualify 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: HENRY CABAUY

PTD

04/20/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date