2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K12088

Entity Name: TICKETS TO GO, INC.

FILED Apr 27, 2005 Secretary of State

150 OXFORD RD.

SUITE 100

FERN PARK, FL 32730 US

Current Mailing Address: New Mailing Address:

% SANDRA G. MOSS
2462 CASTLEWOOD RD
MAITLAND, FL 32751

115 AUTUMN DRIVE
LONGWOOD, FL 32779

FEI Number: 59-2870024 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

115 AUTUMN DRIVE

LONGWOOD, FL 32779

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

MOSS, SANDRA G MRS

2462 CASTLEWOOD RD

MAIT AND FL 32751 LIS

MOSS, SANDRA G MRS

115 AUTUMN DRIVE

LONGWOOD FL 32779

MAITLAND, FL 32751 US LONGWOOD, FL 32779 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: 04/27/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Title: PSD () Delete Title: PSD (X) Change () Addition Name: MOSS, SANDRA G MRS Name: MOSS, SANDRA G MRS

Address: 2462 CASTLEWOOD RD Address: 115 AUTUMN DRIVE
City-St-Zip: MAITLAND, FL 32751 US City-St-Zip: LONGWOOD, FL 32779 US

 Name:
 MOSS, ALAN
 Name:
 MOSS, ALAN

 Address:
 2462 CASTLEWOOD RD
 Address:
 115 AUTUMN DRIVE

 City-St-Zip:
 MAITLAND, FL 32751 US
 City-St-Zip:
 LONGWOOD, FL 32779 US

Title: V () Delete Title: () Change () Addition

Name: BRENNER, LINDA M Name:

Address: 874 CYNTHIANA CIRCLE Address: City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 MOSS, JEFFREY A
 Name:

 Address:
 2508 MOHAWK TR
 Address:

 City-St-Zip:
 MAITLAND, FL 32751 US
 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: SANDRA G MOSS MRS. 04/27/2005