

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K29734

FILED
Mar 28, 2005
Secretary of State

Entity Name: MASTER TRAVEL OF THE PALM BEACHES, INC.

Current Principal Place of Business:

200 ROYAL PALM BEACH BLVD
ROYAL PALM BCH, FL 33411 US

New Principal Place of Business:

Current Mailing Address:

200 ROYAL PALM BEACH BLVD
ROYAL PALM BCH, FL 33411 US

New Mailing Address:

FEI Number: 65-0056751

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REICH, MICHAEL D
399 WINDOW ROCK DR.
WELLINGTON, FL 33414 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: PT () Delete
Name: REICH, LYNDIA S
Address: 399 WINDOW ROCK DR
City-St-Zip: WELLINGTON, FL 33414

Title: VS () Delete
Name: REICH, MICHAEL D
Address: 399 WINDOW ROCK DR
City-St-Zip: W. PALM BEACH, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition
Name: REICH, LYNDIA S
Address: 399 WINDOW ROCK DR
City-St-Zip: WELLINGTON, FL 33414

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: MICHAEL D. REICH

VS

03/28/2005

Electronic Signature of Signing Officer or Director

Date