

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2005 08:00 AM
Secretary of State

DOCUMENT # K63033

1. Entity Name
SITS SOUTHERN INTERNATIONAL TRAVEL SERVICES, INC.



Principal Place of Business
**1700 SW 67TH AVE
MIAMI, FL 33155 US**

Mailing Address
**P.O. BOX 440646
MIAMI, FL 33144-0646 US**

DO NOT WRITE IN THIS SPACE



01242005 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0097944

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**ZAMBRANO, NAPOLEON
2200 SW 16TH ST., #210
MIAMI, FL 33145**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of, the registered agent.

SIGNATURE

[Signature of Napoleon Zambrano]

Feb 14/05.

Signature, typed or printed name of registered agent and title (Block 2200).

(NOTE: Registered Agent signature required when renouncing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PSD
NAME	ZAMBRANO, NAPOLEON
STREET ADDRESS	1700 SW 67 AVE
CITY-ST-ZIP	MIAMI, FL 33155
TITLE	S
NAME	TORRES, VICTOR H
STREET ADDRESS	4583 APPALOOSA STREET
CITY-ST-ZIP	WEST PALM BEACH, FL 33417
TITLE	T
NAME	ESPOSITO, PAUL M
STREET ADDRESS	3023 NE 5TH TERRACE
CITY-ST-ZIP	WELTON MANORS, FL 33334
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1100000232290
02/16/05-80066-020 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature of Napoleon Zambrano]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 14/05

Date

305-854-1448

Daytime Phone #