

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K67943

FILED
Apr 14, 2005
Secretary of State

Entity Name: DADE TRAVEL CENTER, INC.

Current Principal Place of Business:

7230 JACARANDALA
HIALEAH, FL 33014 US

New Principal Place of Business:

7230 JACARANDA LA
HIALEAH, FL 33014 US

Current Mailing Address:

PO BOX 4668
HIALEAH, FL 33014 US

New Mailing Address:

FEI Number: 65-0096531 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAGATZ, GARY
10100 NW 116 WAY #14
MIAMI, FL 33178 US

Name and Address of New Registered Agent:

RAGATZ, GARY
7230 JACARANDA LANE
MIAMI LAKES, FL 33014 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: GARY RAGATZ

04/14/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CELOTTO, DEBRA J
Address: 7230 JACARANDA LANE
City-St-Zip: MIAMI LAKES, FL 33014

Title: D () Delete
Name: RAGATZ, GARY
Address: 7230 JACARANDA LANE
City-St-Zip: MIAMI LAKES, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DEBRA J CELOTTO

D

04/14/2005

Electronic Signature of Signing Officer or Director

Date