2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

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DOCUMENT # L01000010268

1. Entity Name TOURS LLC



FILED
Jan 06, 2005 08:00 AM
Secretary of State

Principal Place of Business

Mailing Address

2810 EAST OAKLAND PARK BLVD. SUITE 200 2810 EAST OAKLAND PARK BLVD.

SUITE 200

FT. LAUDERDALE, FL 33306

FT. LAUDERDALE, FL 33306



01042005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 65-1115325

Applied For Not Applicable

5. Certificate of Status Desired

XÍ

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CAILLAUD, PAUL 2810 FAST OAKLA

2810 EAST OAKLAND PARK BLVD.

SUITE 200

FT. LAUDERDALE, FL 33306

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The above named entity submits this statem	ent for the purpose of	changing its registered office or reg	gistered agent, or both, in the State of F	lorida. I am familiar with, and accept
the obligations of registered agent.	-		· · · ·	

Signature

Signature, typed or printed name of registered agent and title if applicable

(NOTE Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00 Due by May 1, 2005

9.	MANAGING MEMBERS/MANAGERS	
TITLE	MGR	
NAME	KORSON, BRUCE ANDREW	
STREET ADDRESS	2810 EAST OAKLAND PARK BLVD.	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33306	
TITLE	MGR	
NAME	CAILLAUD, PAUL A	
STREET ADDRESS	· · - · · · · · · · · · · · · · · ·	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33306	
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CITY-ST-ZIP		

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11. I hereby certify that the information supplied with the 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 is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the repeiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Comps. Ess. PAULA (

PAUL A CAILLAUD, ESS

14/04 9543965903