2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000086500

MGRM

Name:

Address:

City-St-Zip:

() Delete

405 LEXINGTON AVENUE, 54TH FLOOR

BREENE, JONATHAN

NEW YORK, NY 10174

Entity Name: LUXURY TRAVEL ASSOCIATES, LLC

FILED Feb 13, 2009 Secretary of State

() Change () Addition

Current Principal Place of Business: New Principal Place of Business: 405 LEXINGTON AVENUE, 54TH FLOOR C/O SETAI GROUP NEW YORK, NY 10174 **Current Mailing Address: New Mailing Address:** 405 LEXINGTON AVENUE, 54TH FLOOR C/O SETAI GROUP NEW YORK, NY 10174 FEI Number: 20-1965237 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPDIRECT AGENTS, INC. 515 E. PARK AVE TALLAHASSEE, FL 32301 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete CONROY, JOHN P Name: Name: Address: 405 LEXINGTON AVENUE, 54TH FLOOR Address: City-St-Zip: NEW YORK, NY 10174 City-St-Zip: Title: Title:

Name:

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOHN CONROY **MGRM** 02/13/2009