2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000106467

Entity Name: ANGELS TRAVEL AGENCY, LLC

FILED Mar 25, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

18501 PINES BLVD. 18501 PINES BLVD.

SUITE 300 SUITE 302

PEMBROKE PINES, FL 33029 US PEMBROKE PINES, FL 33029 US

Current Mailing Address: New Mailing Address:

18501 PINES BLVD. 18501 PINES BLVD.

SUITE 300 SUITE 302

PEMBROKE PINES, FL 33029 US PEMBROKE PINES, FL 33029 US

FEI Number: 20-3751283 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:

PEREZ, MARIO M SR WEST INTERNATIONAL CONSULTING, LLC 18501 PINES BLVD. WEST INTERNATIONAL CONSULTING, LLC

SUITE 300 SUITE 337

PEMBROKE PINES, FL 33029 US PEMBROKE PINES, FL 33029 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: DANIA VINUELA 03/25/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 PEREZ, MARIO M SR
 Name:
 PEREZ, MARIO M SR

 Address:
 18501 PINES BLVD. SUITE300
 Address:
 18501 PINES BLVD. SUITE302

 City-St-Zip:
 PEMBROKE PINES, FL 33029 US
 City-St-Zip:
 PEMBROKE PINES, FL 33029 US

Title: MGR () Delete Title: MGR (X) Change () Addition Name: PEREZ, MARCOS SR Name: PEREZ, MARCOS SR

 Address:
 18501 PINES BLVD. SUITE300
 Address:
 18501 PINES BLVD. SUITE302

 City-St-Zip:
 PEMBROKE PINES, FL 33029 US
 City-St-Zip:
 PEMBROKE PINES, FL 33029 US

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 PEREZ, MARIO JR
 Name:
 PEREZ, MARIO JR

 Address:
 18501 PINES BLVD. SUITE300
 Address:
 18501 PINES BLVD. SUITE302

 City-St-Zip:
 PEMBROKE PINES, FL 33029 US
 City-St-Zip:
 PEMBROKE PINES, FL 33029 US

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: MARCOS PEREZ MGR 03/25/2008