

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000102078

**FILED**  
**Feb 13, 2012**  
**Secretary of State**

**Entity Name:** INTERNATIONAL TRAVEL NETWORK LLC

**Current Principal Place of Business:**

882 S. KIRKMAN RD  
202  
ORLANDO, FL 32811

**New Principal Place of Business:**

882 S. KIRKMAN RD  
ORLANDO, FL 32811

**Current Mailing Address:**

882 S. KIRKMAN RD  
202  
ORLANDO, FL 32811

**New Mailing Address:**

882 S. KIRKMAN RD  
ORLANDO, FL 32811

**FEI Number:** 90-0757898

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BROWN, KYLE  
882 S. KIRKMAN RD  
202  
ORLANDO, FL 32811 US

**Name and Address of New Registered Agent:**

BROWN, KYLE  
882 S. KIRKMAN RD  
ORLANDO, FL 32811 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: KYLE BROWN

02/13/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BROWN, KYLE  
Address: 882 S. KIRKMAN RD  
City-St-Zip: ORLANDO, FL 32835

Title: MGR  
Name: GONZALES, LEO  
Address: 882 S. KIRKMAN RD.  
City-St-Zip: ORLANDO, FL 32835

I hereby 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: KYLE BROWN

P

02/13/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date