2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# L66514

Entity Name: SUPER TRAVEL TOURS, INC.

Current Principal Place of Business:

17001 NE 3RD COURT
NORTH MIAMI, FL 33162

New Principal Place of Business:

17001 NE 3RD COURT
NORTH MIAMI BEACH, FL 33162

Current Mailing Address:

17001 NE 3RD COURT
NORTH MIAMI, FL 33162

New Mailing Address:

17001 NE 3RD COURT
NORTH MIAMI BEACH, FL 33162

FEI Number: 65-0184381 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LECOURT, JEAN MARC
17001 NE 3RD COURT
NORTH MIAMI BEACH, FL 33162 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: LECOURT, JEAN-MARC
Address: 17001 NE 3RD COURT
City-St-Zip: NORTH MIAMI, FL 33162

Title: D ( ) Delete
Name: LECOURT, HELENE
Address: 17001 NE 3RD COURT
City-St-Zip: NORTH MIAMI, FL 33162

Title: D ( ) Delete
Name: SAMUEL, CATHERINE
Address: 6240 BRENVILLE, #103C
City-St-Zip: BROSSARD PQUE, CANADA, CN J4Z-3J8 CN

Title: D ( ) Delete
Name: BLIER, MURIELLE
Address: 855-114 AVENUE, #3
City-St-Zip: DRUMMONDVILLE ROME, CN J2B-4J6

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: LECOURT, JEAN-MARC
Address: 17001 NE 3RD COURT
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: D (X) Change ( ) Addition
Name: LECOURT, HELENE
Address: 17001 NE 3RD COURT
City-St-Zip: NORTH MIAMI BEACH, FL 33162

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 exemption stated in Chapter 119, 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: JEAN MARC LECOURT D 04/29/2009

Electronic Signature of Signing Officer or Director Date