

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M33518

FILED  
Apr 25, 2008  
Secretary of State

Entity Name: LE JEUNE RD. TRAVEL SERVICE INC.

**Current Principal Place of Business:**

16000 NW 7 AVE  
MIAMI, FL 33169 US

**New Principal Place of Business:**

**Current Mailing Address:**

16000 NW 7 AVE  
MIAMI, FL 33169 US

**New Mailing Address:**

FEI Number: 59-2682972      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CRUZ, FELIX  
782 NW LEJEUNE RD  
SUITE 439  
MIAMI, FL 33126 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: VP ( ) Delete  
Name: CANADAS, MARIO  
Address: 20711 SW 116 PLACE  
City-St-Zip: MIAMI, FL 33189

Title: P ( ) Delete  
Name: KNOWLES, LIVINGSTONE  
Address: 8925 NE 9 CT  
City-St-Zip: MIAMI, FL 33138

Title: S ( ) Delete  
Name: JARAMILLO, NANCY  
Address: 631 SW 111 LANE 5-102  
City-St-Zip: PEMBROKE PINES, FL 33025

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: NANCY JARAMILLO

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04/25/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date