2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
May 31, 2005
Secretary of State

DOCUMENT# M47780

Entity Name: STONE TRAVEL TECHNOLOGIES, INC.

Current Principal Place of Business:

3111 UNIVERSITY DR. #119
SUITE 103
CORAL SPRINGS, FL 33065 US

New Principal Place of Business:

3111 UNIVERSITY DR.
SUITE 103
CORAL SPRINGS, FL 33065 US

Current Mailing Address:

3111 UNIVERSITY DR. #119
SUITE 103
CORAL SPRINGS, FL 33065 US

New Mailing Address:

3111 UNIVERSITY DR.
SUITE 103
CORAL SPRINGS, FL 33065 US

FEI Number: 65-0011198 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STONE, LEONARD W.
3111 UNIVERSITY DR. #119
C/O BON VOYAGE TRAVEL
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

STONE, LEONARD W.
3111 UNIVERSITY DR. #103
C/O BON VOYAGE TRAVEL
CORAL SPRINGS, FL 33065 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: 05/31/2005
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PST ( ) Delete
Name: STONE, LEONARD,
Address: 6789 CASTLEMAINE AV
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D ( ) Delete
Name: STONE, LEONARD,
Address: 6789 CASTLEMAINE AV
City-St-Zip: BOYNTON BEACH, FL 33437

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP ( ) Change (X) Addition
Name: STONE, STUART K
Address: 5006 NW 95TH DRIVE
City-St-Zip: CORAL SPRINGS, FL 33076 US

Title: VP ( ) Change (X) Addition
Name: STONE, TRACY L
Address: 7504 NW 40TH PLACE
City-St-Zip: CORAL SPRINGS, FL 33065 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LEONARD W. STONE PRES 05/31/2005
Electronic Signature of Signing Officer or Director — Date