

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M80924

FILED  
Mar 19, 2008  
Secretary of State

Entity Name: MULTI-TRAVEL CONNECTION, INC.

## Current Principal Place of Business:

2232 WINTER WOODS BLVD  
WINTER PK, FL 32792

## New Principal Place of Business:

## Current Mailing Address:

2232 WINTER WOODS BLVD  
WINTER PK, FL 32792

## New Mailing Address:

FEI Number: 59-2938390

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BOUFFARD, NUMERIANO V.  
2232 WINTER WOODS BLVD  
WINTER PARK, FL 32792 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: VD ( ) Delete  
Name: BOUFFARD, FERNANDO,  
Address: 5351 HANSEL AVE  
City-St-Zip: ORLANDO, FL 32709

Title: D ( ) Delete  
Name: BOUFFARD, JOSE' ANTO, NIO  
Address: 1936 SHERWOOD GLEN  
City-St-Zip: BLOOMFIELD HILLS, MI

Title: VDT ( ) Delete  
Name: BOUFFARO, FERNANDO  
Address: 5351 HANSEL AVE  
City-St-Zip: ORLANDO, FL 32709

Title: DS ( ) Delete  
Name: BOUFFARO, JOSE A  
Address: 1936 SHERWOOD GLEN  
City-St-Zip: BLOOMFIELD HILLS, MI

Title: P ( ) Delete  
Name: BOUFFARD, NUMERIANO V  
Address: 1056 HORNBEAM AVENUE  
City-St-Zip: OVIEDO, FL

## 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:

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: NUMERIANO V BOUFFARD

P

03/19/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date