2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009577

Entity Name: CURACAO TOURISM CORPORATION

FILED Jan 18, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1690 WACHOVIA FINANCIAL CENTER 3362 SW 3RD STREET 102

200 S BISCAYNE BLVD

MIAMI, FL 33131

Current Mailing Address:

200 S BISCAYNE BLVD

New Mailing Address:

MIAMI, FL 33145

1690 WACHOVIA FINANCIAL CENTER 3362 SW 3RD STREET

MIAMI, FL 33131 MIAMI, FL 33145

FEI Number: 06-1756068 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MILLER, BROOKS C MILLER, BROOKS C 1690 WACHOVIA FINANCIAL CENTER 200 SOUTH BISCAYNE BLVD. 200 S BISCAYNE BLVD 1690

MIAMI, FL 33131 US MIAMI, FL 33131 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: BROOKS C. MILLER 01/18/2006

Electronic Signature of Registered Agent Date

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

(X) Change () Addition () Delete

KLEINMOEDIG, ALMEE KLEINMOEDIG, AIMEE Name: Name: 1690 WACHOVIA FINANCIAL CENTER Address: 3362 SW 3RD STREET, SUITE 102 Address:

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33145

Title: SD () Delete Title: (X) Change () Addition

WALLE, CLIFTON Name: Name: WALLE, CLIFTON

Address: 1690 WACHOVIA FINANCIAL CENTER Address: 3362 SW 3RD STREET, SUITE 102

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33145

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BROOKS C. MILLER RΑ 01/18/2006