

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 06, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P00000035418**

1. Entity Name

TRAVELGROUP INTERNATIONAL, INC.



Principal Place of Business

125 SE MIZNER BLVD. SUITE 14  
BOCA RATON, FL 33432

Mailing Address

125 SE MIZNER BLVD. SUITE 14  
BOCA RATON, FL 33432

**DO NOT WRITE IN THIS SPACE**

02252006 No Chg-P CR2E034 (11/05)

4. FEI Number  
65-1071395

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

SPIERMAN, ELLIOTT  
7293 AMBER FALLS LANE  
BOYNTON BEACH, FL 33437

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME WEISSBLUM, KENNETH  
STREET ADDRESS 3831 NE 25TH AVENUE  
CITY-ST-ZIP LIGHTHOUSE POINT, FL 33064

TITLE VD  
NAME WEISSBLUM, FAYE  
STREET ADDRESS 3831 NE 25TH AVENUE  
CITY-ST-ZIP LIGHTHOUSE POINT, FL 33064

TITLE SD  
NAME WEISSBLUM, LONN  
STREET ADDRESS 3831 NE 25TH AVENUE  
CITY-ST-ZIP LIGHTHOUSE POINT, FL 33064

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

100000458345  
03/17/06-80041-011 (50.00)

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KENNETH WEISSBLUM D.P.

3/4/06

561-447-0750

Date

Daytime Phone #