2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000044209

Entity Name: FLORIDAZE EXCURSIONS, INC.

FILED Jul 07, 2005 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	FNER AVENU), FL 32809	JE			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	FNER AVENU), FL 32809	JE			
FEI Number:	: 59-3643312	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and Address of	of New Registered Agent:	
WINTER F	SIANA AVE., P PARK, FL 327	89 US	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUF					
	Electro	nic Signature of Registered Age	ent	Date	
		3(2)(b), F.S., the corporation did no	t receive the prior notice.		
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip: Title:	ALLEY, ROBE 1719 HOFFNE ORLANDO, FL	R AVENUE 32809) Delete	Title: Name: Address: City-St-Zip: Title:	() Change () Addition () Change () Addition	
			Name:		
Name: Address: City-St-Zip:	501 N LK SYB MAITLAND, FL	ELIA	Name: Address: City-St-Zip:		
Address:	501 N LK SYB MAITLAND, FL	ELIA 32751) Delete /E AVE.	Address:	() Change () Addition	
Address: City-St-Zip: Title: Name: Address:	501 N LK SYB MAITLAND, FL VP (ALBERT, STEV 7037 DELORA	ELIA 32751) Delete /E AVE. 32819) Delete AVE.	Address: City-St-Zip: Title: Name: Address:	() Change () Addition () Change () Addition	

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: MIKE ALLEY D 07/07/2005