2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000077077

Name:

Address:

City-St-Zip:

QUINONES, PABLO A

13350 SW 128 CT.

MIAMI, FL 33186

Entity Name: PJR INTERNATIONAL TRAVEL CORPORATION

FILED Apr 18, 2005 Secretary of State

•						
Current Principal Place of Business:				New Principal Place of Business:		
13350 SW 128 STREET				3301 SW 107 AVENUE		
B MIAMI, FL 33186				MIAMI, FL 33165		
Current Mailing Address:				New Mailing Address:		
13350 SW 128 STREET B MIAMI, FL 33186				3301 SW 107 AVENUE MIAMI, FL 33165		
FEI Number:	52-2267550	FEI Number Applied For ()	FEI Num	nber Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
QUINONES, PABLO A 13350 SW 128 ST. B MIAMI, FL 33186 US				QUINONES, PABLO A 3301 SW 107 AVENUE MIAMI, FL 33165 US		
The above in the State		ty submits this statement for the	purpose of	changing its registered	office or registered agent, or both,	
SIGNATURE: PABLO A. QUINONES				04/18/2005		
Electronic Signature of Registered Agent				Date		
Election Can	npaign Finan	cing Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PSD QUINONES 14832 SW MIAMI, FL	104 STREET, #9		Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	SD DASILVA, R 13350 SW MIAMI, FL	128 ST.		Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title:	PTD	(X) Delete		Title: () 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.

Name:

Address:

City-St-Zip:

SIGNATURE: PABLO A. QUINONES **PSD** 04/18/2005

() Change () Addition