

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000080435

FILED
May 05, 2005
Secretary of State

Entity Name: TRAVEL & TOURS MARKETING, INC.

Current Principal Place of Business:

7800 SOUTHLAND BLVD.
SUITE 112
ORLANDO, FL 32809

New Principal Place of Business:

5950 LAKEHURST DR.
SUITE 241
ORLANDO, FL 32809

Current Mailing Address:

P O BOX 771444
ORLANDO, FL 32877 US

New Mailing Address:

FEI Number: 59-3676141 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARCE, LUIS
813 VERMONT WOODS LANE
ORLANDO, FL 32824 US

Name and Address of New Registered Agent:

ARCE, LUIS
P.O. BOX 771444
ORLANDO, FL 32877 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: LUIS A ARCE

05/05/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ARCE, LUIS A
Address: 813 VERMONT WOODS LANE
City-St-Zip: ORLANDO, FL 32824

Title: VP () Delete
Name: ARCE, YOLANDA
Address: 813 VERMONT WOODS LANE
City-St-Zip: ORLANDO, FL 32824

Title: S () Delete
Name: ARCE, YOLANDA
Address: 813 VERMONT WOODS LANE
City-St-Zip: ORLANDO, FL 32824

Title: T () Delete
Name: ARCE, LUIS A
Address: 813 VERMONT WOODS LANE
City-St-Zip: ORLANDO, FL 32824

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ARCE, LUIS A
Address: P.O BOX 771444
City-St-Zip: ORLANDO, FL 32877

Title: VP (X) Change () Addition
Name: ARCE, YOLANDA
Address: P.O BOX 771444
City-St-Zip: ORLANDO, FL 32877

Title: S (X) Change () Addition
Name: ARCE, YOLANDA
Address: P.O BOX 771444
City-St-Zip: ORLANDO, FL 32877

Title: T (X) Change () Addition
Name: ARCE, LUIS A
Address: P.O BOX 771444
City-St-Zip: ORLANDO, FL 32877

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: LUIS A. ARCE

MR.

05/05/2005

Electronic Signature of Signing Officer or Director

Date