

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000080435

FILED
May 05, 2008
Secretary of State

Entity Name: TRAVEL & TOURS MARKETING, INC.

Current Principal Place of Business:

7800 SOUTHLAND BLVD
SUITE 104
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

P O BOX 771444
ORLANDO, FL 32877 US

New Mailing Address:

P O BOX 592038
ORLANDO, FL 32859 US

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
P.O. BOX 771444
ORLANDO, FL 32877 US

Name and Address of New Registered Agent:

ARCE, LUIS
7800 SOUTHLAND BLVD
ORLANDO, FL 32809 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 ARCE

05/05/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ARCE, LUIS A
Address: P.O BOX 592038
City-St-Zip: ORLANDO, FL 32859

Title: VP (X) Change () Addition
Name: ARCE, YOLANDA
Address: P.O BOX 592038
City-St-Zip: ORLANDO, FL 32859

Title: S (X) Change () Addition
Name: ARCE, YOLANDA
Address: P.O BOX 592038
City-St-Zip: ORLANDO, FL 32859

Title: T (X) Change () Addition
Name: ARCE, LUIS A
Address: P.O BOX 592038
City-St-Zip: ORLANDO, FL 32859

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUIS ARCE

PRES

05/05/2008

Electronic Signature of Signing Officer or Director

Date