2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000006141

Entity Name: DO IT ALL TRAVEL INC.

FILED Apr 24, 2002 8:00 AM Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
15105 N W 77TH AVENUE SUITE 305					
MIAMI LAKES, FL 33014 Current Mailing Address:			New Mailing Addres	New Mailing Address:	
15105 N W 77TH AVENUE SUITE 305 MIAMI LAKES, FL 33014					
FEI Number: 6	35-1077500	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
DUPREE, GERALD ERNEST 15105 N W 77TH AVENUE SUITE 3C MIAMI LAKES, FL 33015 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: Electronic Signature of Registered Agent This corporation is eligible to satisfy its Intangible Tax filing requirement			ment and elects to do so (X).	Date	
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () D DUPREE, MILES 20260 N W 2ND S PEMBROKE PINE	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () D KUDJA, JOSE 420 N W 199TH A PEMBROKE PINE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () D DUPREE, GERAL 1070 N E 204TH NORTH MIAMI BE	TERRACE	Title: Name: Address: City-St-Zip:	() 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: GERALD E DUPREE MR 04/24/2002