

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000027148

FILED  
Apr 10, 2004  
Secretary of State

Entity Name: MAX TRAVEL, INC.

## Current Principal Place of Business:

4822 PEBBLE BEACH DRIVE  
ORLANDO, FL 32811

## New Principal Place of Business:

8156 VIA BELLA NOTTE  
ORLANDO, FL 32836

## Current Mailing Address:

4822 PEBBLE BEACH DRIVE  
ORLANDO, FL 32811

## New Mailing Address:

8156 VIA BELLA NOTTE  
ORLANDO, FL 32836

FEI Number: 52-2301108

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CRACASSO, LUIS VICENTE D  
4822 PEBBLE BEACH DRIVE  
ORLANDO, FL 32811

## Name and Address of New Registered Agent:

CRACASSO, LUIS VICENTE D  
8156 VIA BELLA NOTTE  
ORLANDO, FL 32836

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:

04/10/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: CRACASSO, LUIS VICENTE D  
Address: 4822 PEBBLE BEACH DRIVE  
City-St-Zip: ORLANDO, FL 32811

Title: D ( ) Delete  
Name: CRACASSO, MAYA J  
Address: 4822 PEBBLE BEACH DRIVE  
City-St-Zip: ORLANDO, FL 32811

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: CRACASSO, LUIS VICENTE D  
Address: 8156 VIA BELLA NOTTE  
City-St-Zip: ORLANDO, FL 32836

Title: D (X) Change ( ) Addition  
Name: CRACASSO, MAYA J  
Address: 8156 VIA BELLA NOTTE  
City-St-Zip: ORLANDO, FL 32836

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 VICENTE DAVIDOFF CRACASSO

D

04/10/2004

Electronic Signature of Signing Officer or Director

Date