


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 05, 2008 8:00 am
Secretary of State

05-07-2008 90112 003 ***150.00

DOCUMENT # P01000040177 1. Entity Name ALL TRAVEL SERVICES, CRUISES AND TOURS, INC.	
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Principal Place of Business 3434 W. COLUMBUS DRIVE, SUITE 202 TAMPA, FL 33607	Mailing Address 3434 W. COLUMBUS DRIVE, SUITE 202 TAMPA, FL 33607
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04282008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3711464	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent ZABALA, YOLOXOCHITL 3434 W. COLUMBUS DRIVE, SUITE 202 TAMPA, FL 33607
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE: <u>Yoloxochitl ZABALA - President</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE: <u>5-30-08</u>

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ZABALA, YOLOXOCHITL 3434 W. COLUMBUS DR., STE 202 TAMPA, FL 33607
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE: <u>Yoloxochitl ZABALA - President</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Date: <u>5-30-08</u> Daytime Phone #: <u>(813) 873-2323</u>