

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000041238

FILED
Apr 16, 2004
Secretary of State

Entity Name: A JOURNEY TO RELAXATIONI, INC.

Current Principal Place of Business:

STURDIVANT AVENUE
SUITE 762
ATLANTIC BEACH, FL 32233 US

New Principal Place of Business:

STURDIVANT AVENUE
SUITE 462
ATLANTIC BEACH, FL 32233 US

Current Mailing Address:

12074 AUTUMN SUNRISE DRIVE
JACKSONVILLE, FL 32246 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARLENE, ORTIZ
12074 AUTUMN SUNRISE DR
JACKSONVILLE, FL 32246 US

Name and Address of New Registered Agent:

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

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ORTIZ, ARLENE
Address: 12074 AUTUMN SUNRISE DRIVE
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: V () Delete
Name: ORTIZ, CARLOS A
Address: 12074 AUTUMN SUNRISE DRIVE
City-St-Zip: JACKSONVILLE, FL 32246 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ARLENE ORTIZ

PRES

04/16/2004

Electronic Signature of Signing Officer or Director

Date