

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000047546

FILED
Feb 04, 2004
Secretary of State

Entity Name: PROMO-TRAVEL INTERNATIONAL, INC.

Current Principal Place of Business:

1635-B ROYAL PALM DRIVE, SOUTH
SUITE E6
GULFPORT, FL 33707 US

New Principal Place of Business:

555 SUN VALLEY DRIVE
SUITE E6
ROSWELL, GA 30076 US

Current Mailing Address:

555 SUN VALLEY DRIVE
SUITE E6
ROSWELL, GA 30076

New Mailing Address:

555 SUN VALLEY DRIVE
SUITE E6
ROSWELL, GA 30076 US

FEI Number: 59-3616125

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALPERT, DAVID I
2785 KIPPS COLONY DRIVE
SUITE 304
GULFPORT, FL 33707 US

Name and Address of New Registered Agent:

MINTZ, CHARLES S
8125 NW 191 STREET
MIAMI, 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: CHARLES S. MINTZ

02/04/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MINTZ, CHARLES S
Address: 555 SUN VALLEY DRIVE, SUITE E-6
City-St-Zip: ROSWELL, GA 30076 US

Title: VSTD () Delete
Name: ALPERT, DAVID I
Address: 2785 KIPPS COLONY DRIVE, SUITE 304
City-St-Zip: GULFPORT, FL 33707 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VSTD (X) Change () Addition
Name: ALPERT, DAVID I
Address: 555 SUN VALLEY DRIVE, SUITE E-6
City-St-Zip: ROSWELL, GA 30076 US

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: CHARLES S. MINTZ

PD

02/04/2004

Electronic Signature of Signing Officer or Director

Date