

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000064933

FILED  
May 01, 2009  
Secretary of State

Entity Name: CARTAGENA TRAVEL & TOURS, INC.

## Current Principal Place of Business:

11510 SW 147 AVE, STE 14  
MIAMI, FL 33196

## New Principal Place of Business:

## Current Mailing Address:

11510 SW 147 AVE, STE 14  
MIAMI, FL 33196

## New Mailing Address:

FEI Number: 48-1263765

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ESPRIELLA, CLAUDIA DE LA  
11510 SW 147 AVE, STE 14  
MIAMI, FL 33196 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: DE LA ESPRIELLA, CLAUDIA  
Address: 11355 SW 143 CT  
City-St-Zip: MIAMI, FL 33186

Title: VP ( ) Delete  
Name: DE LA ESPRIELLA, GABRIEL  
Address: 11355 SW 143 CT  
City-St-Zip: MIAMI, FL 33186

Title: T ( ) Delete  
Name: DE LA ESPRIELLA, ADALGIZA  
Address: 11355 SW 143 CT  
City-St-Zip: MIAMI, FL 33186

Title: O ( ) Delete  
Name: BAJAJ, ARVINDER  
Address: 307 EGRET LANE  
City-St-Zip: WESTON, FL 33322

Title: P ( ) Delete  
Name: MACIA, JOSE A  
Address: 11355 S.W. 143 CT.  
City-St-Zip: MIAMI, FL 33186

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: O (X) Change ( ) Addition  
Name: BAJAJ, ARVINDER  
Address: 11510 SW 147 AVENUE SUITE 14  
City-St-Zip: MIAMI, FL 33196

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: CLAUDIA E. DE LA ESPRIELLA

D

05/01/2009

Electronic Signature of Signing Officer or Director

Date