

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000000629

FILED
Apr 27, 2006
Secretary of State

Entity Name: FRISINA VIAGGI TOURS, INC.

Current Principal Place of Business:

6001 NW 153RD ST
SUITE E
MIAMI LAKES, FL 33014

New Principal Place of Business:

1952 NW 171 AV
PEMBROKE PINES, FL 33028

Current Mailing Address:

6001 NW 153RD ST
SUITE E
MIAMI LAKES, FL 33014

New Mailing Address:

1952 NW 171 AV
PEMBROKE PINES, FL 33028

FEI Number: 03-0519693

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHASSAGNE, SABRINA ESQ.
ONE N.E. 2ND AVENUE
SUITE 208
MIAMI, FL 33132 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: VD () Delete
Name: VIRGARA, ROSA
Address: C/O 100 S.W. 117TH TERRACE, #208
City-St-Zip: PEMBROKE PINES, FL 33025

Title: PD () Delete
Name: ROSARIO, CARMEN
Address: C/O 100 S.W. 117TH TERRACE, #208
City-St-Zip: PEMBROKE PINES, FL 33025

Title: STD () Delete
Name: ROSARIO, ANDRES
Address: C/O S.W. 117TH TERRACE, #208
City-St-Zip: PEMBROKE PINES, FL 33025

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: KARINA FRISINA

MS

04/27/2006

Electronic Signature of Signing Officer or Director

Date