

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000026291

Entity Name: JIM ERASO TRAVEL, INC.

**FILED**  
**Apr 17, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

50 W MASHTA DRIVE STE 3  
KEY BISCAYNE, FL 33149

**New Principal Place of Business:**

**Current Mailing Address:**

50 W MASHTA DRIVE STE 3  
KEY BISCAYNE, FL 33149

**New Mailing Address:**

FEI Number: 45-2001676

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JIM, ERASO  
50 W MASHTA DRIVE STE 3  
KEY BISCAYNE, FL 33149 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: ERASO, JIM  
Address: 50 W MASHTA DRIVE STE 3  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: VSD  
Name: ERASO, PATRICIA  
Address: 50 W MASHTA DRIVE STE 3  
City-St-Zip: KEY BISCAYNE, FL 33149

I hereby 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 all other like empowered.

SIGNATURE: JIM ERASO

PD

04/17/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date