

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000048168

FILED
Jun 30, 2005
Secretary of State

Entity Name: ESCAPE TOURS DESTINATION & MEETING COMPANY

Current Principal Place of Business:

6653 TANGLEWOOD BAY DRIVE
SUITE # 2123
ORLANDO, FL 32821

New Principal Place of Business:

Current Mailing Address:

6653 TANGLEWOOD BAY DRIVE
SUITE # 2123
ORLANDO, FL 32821

New Mailing Address:

FEI Number: 06-1692939

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIETZ, WILLIAM J
25 SOUTH MAGNOLIA AVENUE
ORLANDO, FL 32801 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: P D () Delete
Name: THOMAS-GISO, EVELYN
Address: 6653 TANGLEWOOD BAY DRIVE
City-St-Zip: ORLANDO, FL 32821 US

Title: VP () Delete
Name: GISO, LEONARD FRANK
Address: 6653 TANGLEWOOD BAY DRIVE
City-St-Zip: ORLANDO, FL 32821

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: EVELYN GISO

Electronic Signature of Signing Officer or Director

OWNE

06/30/2005

Date