

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000075434

FILED  
Apr 30, 2004  
Secretary of State

**Entity Name:** TROPICAL SERVICE TRAVEL & TOURS, CORP

**Current Principal Place of Business:**

961 PALM AVENUE  
HIALEAH, FL 33010

**New Principal Place of Business:**

1153 PALM AVENUE  
HIALEAH, FL 33010

**Current Mailing Address:**

961 PALM AVENUE  
HIALEAH, FL 33010

**New Mailing Address:**

1153 PALM AVENUE  
HIALEAH, FL 33010

**FEI Number:** 41-2122584

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PIREZ, JUAN C  
922 N.W. 34TH AVENUE  
MIAMI, FL 33125 US

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

PIREZ, JUAN C  
1153 PALM AVE  
HIALEAH, FL 33010 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: JUAN CARLOS PIREZ

04/30/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: PIREZ, JUAN C  
Address: 961 PALM AVENUE  
City-St-Zip: HIALEAH, FL 33010

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: PIREZ, JUAN C  
Address: 1153 PALM AVENUE  
City-St-Zip: HIALEAH, FL 33010

Title: O ( ) Change (X) Addition  
Name: RODRIGUEZ, MANUEL  
Address: 1153 PALM AVE  
City-St-Zip: HIALEAH, FL 33010

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: JUAN CARLOS PIREZ

D

04/30/2004

Electronic Signature of Signing Officer or Director

Date