

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000096329

Entity Name: TRAVELMAX USA, CORP.

FILED  
Jan 16, 2009  
Secretary of State

## Current Principal Place of Business:

10544 NW 26TH ST  
SUITE E 101  
DORAL, FL 33172

## New Principal Place of Business:

## Current Mailing Address:

10544 NW 26 TH ST  
SUITE E 101  
DORAL, FL 33172

## New Mailing Address:

FEI Number: 20-0200991

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GARGANO, ROQUE  
10544 NW 26TH ST  
SUITE E 101  
DORAL, FL 33172 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: P ( ) Delete  
Name: GARGANO, ROQUE  
Address: 10544 NW 26TH ST SUITE E101  
City-St-Zip: DORAL, FL 33172

Title: V ( ) Delete  
Name: LEYVA, LUCILA  
Address: 10544 NW 26TH ST SUITE E 101  
City-St-Zip: DORAL, FL 33172

## 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 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: ROQUE GARGANO

P

01/16/2009

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

\_\_\_\_\_  
Date