2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 21, 2004
Secretary of State

DOCUMENT# P03000149920

Entity Name: J.A. TRAVEL COMPANY

Current Principal Place of Business:

3561 SW 142 AVENUE
MIRAMAR, FL 33027 US

New Principal Place of Business:

Current Mailing Address:

3561 SW 142 AVENUE
MIRAMAR, FL 33027 US

New Mailing Address:

FEI Number: 20-0084096 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KNIGHT, JOHN
3561 SW 142 AVENUE
MIRAMAR, FL 33027 US

Name and Address of New Registered Agent:

KNIGHT, JOHN OWNER
3561 SW 142 AVENUE
MIRAMAR, FL 33027 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: JOHN KNIGHT 10/21/2004
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: D ( ) Delete
Name: KNIGHT, JOHN
Address: 3561 SW 142 AVENUE
City-St-Zip: MIRAMAR, FL 33027 US

Title: D ( ) Delete
Name: HOILETT-KNIGHT, MICHELLE
Address: 3561 SW 142 AVENUE
City-St-Zip: MIRAMAR, FL 33027 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR (X) Change ( ) Addition
Name: KNIGHT, JOHN OWNER
Address: 3561 SW 142 AVENUE
City-St-Zip: MIRAMAR, FL 33027 US

Title: MRS. (X) Change ( ) Addition
Name: HOILETT-KNIGHT, MICHELLE
Address: 3561 SW 142 AVENUE
City-St-Zip: MIRAMAR, FL 33027 US

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: JOHN KNIGHT OWNE 10/21/2004
Electronic Signature of Signing Officer or Director Date