2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 14, 2007
Secretary of State

DOCUMENT# P03000150865

Entity Name: TONY'S TRANSPORTATION & TOURS, INC.

Current Principal Place of Business:

1131 N NORTHLAKE DR
HOLLYWOOD, FL 33019

New Principal Place of Business:

2181 N 56 TERRACE
HOLLYWOOD, FL 33021

Current Mailing Address:

5220 S UNIVERSITY DR
STE. C-102
DAVIE, FL 33328

New Mailing Address:

FEI Number: 20-0474615 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COGNET, ELVIN
1131 N NORTHLAKE DR
HOLLYWOOD, FL 33019 US

Name and Address of New Registered Agent:

SILVA'S ENTERPRISE, INC.
5220 S UNIVERSITY DR
SUITE C-102
DAVIE, FL 33328 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: FERNANDO SILVA 05/14/2007
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: PTO ( ) Delete
Name: COGNET, ELVIN
Address: 1131 N NORTHLAKE DR
City-St-Zip: HOLLYWOOD, FL 33019

Title: VPSO ( ) Delete
Name: DELGADO, LINDA
Address: 1131 N NORTHLAKE DR
City-St-Zip: HOLLYWOOD, FL 33019

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTO (X) Change ( ) Addition
Name: COGNET, ELVIN
Address: 2181 N 56 TERRACE
City-St-Zip: HOLLYWOOD, FL 33021

Title: VPSO (X) Change ( ) Addition
Name: DELGADO, LINDA
Address: 2181 N 56 TERRACE
City-St-Zip: HOLLYWOOD, FL 33021

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: ELVIN COGNET PTO 05/14/2007
Electronic Signature of Signing Officer or Director Date