2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000031316

15520 SW 104TH AVE

MIAMI, FL 33157

Address:

City-St-Zip:

Entity Name: THE DISCIPLE TRAVELERS CORP.

FILED May 01, 2006 Secretary of State

| Current Principal Place of Business: | | | New Principal Place | New Principal Place of Business: | |
|---|---|---|---|--|--|
| 1034 NW : MIAMI, FL | 51ST STREET 33127 | | | | |
| Current Mailing Address: | | | New Mailing Addres | New Mailing Address: | |
| 1034 NW : MIAMI, FL | 51ST STREET 33127 | | | | |
| FEI Number | : 36-4570101 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and | d Address of C | urrent Registered Agent: | Name and Address | of New Registered Agent: | |
| ONE SE T MIAMI, FL | | submits this statement for the I | ournose of changing its registere | ed office or registered agent, or both, | |
| | e of Florida. | submits this statement for the p | ourpose of changing its registere | d office of registered agent, or both, | |
| SIGNATU | | | | | |
| | Electror | ic Signature of Registered Ag | ent | Date | |
| | | 3(2)(b), F.S., the corporation did no g Trust Fund Contribution (). | ot receive the prior notice. | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANG | ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR | |
| Title: Name: Address: City-St-Zip: | D (X REESE, JOHN 1034 NW 51ST MIAMI, FL 331 | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () LAMPKIN, ALPI 6608 NW 3RD MIAMI, FL 331 | COURT | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D () WALDEN, VINC 1924 NW 5TH I MIAMI, FL 331 | PLACE | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: | D () SMITH, LAURE | Delete NCE | Title: Name: | () Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: VINCENT WALDEN D 05/01/2006