

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000130421

Entity Name: INKA WASI TRAVEL CORPORATION**FILED**
Oct 25, 2007
Secretary of State**Current Principal Place of Business:**20801 BISCAYNE BLVD
403
MIAMI, FL 33180**New Principal Place of Business:**20801 BISCAYNE BLVD
403
MIAMI, FL 33180**Current Mailing Address:****New Mailing Address:**

FEI Number: 87-0737873 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:FLORES, FLOR J PRES
17100 NORTH BAY ROAD
1310
MIAMI, FL 33160 US**Name and Address of New Registered Agent:**FLORES, FLOR J TS
17100 NORTH BAY ROAD
1310
MIAMI, FL 33160 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: FLOR J. FLORES

10/25/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: P () Delete
Name: MOLINA, MOISES M P
Address: 17100 NORTH BAY ROAD APTO 1310
City-St-Zip: MIAMI, FL 33160Title: TS () Delete
Name: FLORES, ESPINOZA J TS
Address: 17100 NORTH BAY ROAD APTO 1310
City-St-Zip: MIAMI, FL 33160Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PRES (X) Change () Addition
Name: TIMOTEO, LUCIO M PRES
Address: 17810 SOUTH WEST 144 CT
City-St-Zip: MIAMI, FL 33177Title: VP (X) Change () Addition
Name: MOLINA, MOISES M VICEPRE
Address: 17100 NORTH BAY ROAD APTO 1310
City-St-Zip: MIAMI, FL 33160Title: TS () Change (X) Addition
Name: FLORES, FLOR J TS
Address: 17100 NORTH BAY ROAD APTO 1310
City-St-Zip: MIAMI, FL 33160

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: FLOR J. FLORES

TS

10/25/2007

Electronic Signature of Signing Officer or Director

Date