

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000130421

FILED
Jun 15, 2009
Secretary of State

Entity Name: INKA WASI TRAVEL CORPORATION

Current Principal Place of Business:

20801 BISCAYNE BLVD
403
MIAMI, FL 33180

New Principal Place of Business:

Current Mailing Address:

20801 BISCAYNE BLVD
403
MIAMI, FL 33180

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 TS
13732 SW 169 LN
MIAMI, FL 33177 US

Name and Address of New Registered Agent:

FLORES, FLOR J TS
17150 N BAY RD
UNIT 2203
SUNNY ISLES BEACH, 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

06/15/2009

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: PRES () Delete
Name: MOLINA, MOISES M PRES
Address: 13732 SW 169 LN
City-St-Zip: MIAMI, FL 33177

Title: VP () Delete
Name: MOLINA, MOISES M VICEPRE
Address: 13732 SW 169 LN
City-St-Zip: MIAMI, FL 33177

Title: TS () Delete
Name: FLORES, FLOR J TS
Address: 13732 SW 169 LN
City-St-Zip: MIAMI, FL 33177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MOLINA, MOISES M PRES
Address: 17150 N BAY RD
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: VP (X) Change () Addition
Name: MOLINA, MOISES M VICEPRE
Address: 17150 N BAY RD
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: TS (X) Change () Addition
Name: FLORES, FLOR J TS
Address: 17150
City-St-Zip: SUNNY ISLES BEACH, 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

06/15/2009

Electronic Signature of Signing Officer or Director

Date