2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# P05000063629

Entity Name: TROPITOUR TRAVEL INC

Current Principal Place of Business:

11120 SW 88TH STREET
SUITE 207
MIAMI, FL 33176

New Principal Place of Business:

14273 SW 134 COURT
MIAMI, FL 33186

Current Mailing Address:

11120 SW 88TH STREET
SUITE 207
MIAMI, FL 33176

New Mailing Address:

14273 SW 134 COURT
MIAMI, FL 33186

FEI Number: 20-2762141 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHAVES, FABIO
11120 SW 88TH STREET
SUITE 207
MIAMI, FL 33176 US

Name and Address of New Registered Agent:

MAZZA, MIGUEL
14273 SW 134 COURT
MIAMI, FL 33186 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: MIGUEL MAZZA 05/01/2006
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: PD ( ) Delete
Name: CHAVES, FABIO
Address: 11120 SW 88TH STREET SUITE 207
City-St-Zip: MIAMI, FL 33176

Title: VPD ( ) Delete
Name: MAZZA, MIGUEL
Address: 11120 SW 88TH STREET SUITE 207
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MAZZA, YARA
Address: 14273 SW 134 COURT
City-St-Zip: MIAMI, FL 33186

Title: VP (X) Change ( ) Addition
Name: MAZZA FILHO, MIGUEL
Address: 14273 SW 134 COURT
City-St-Zip: MIAMI, FL 33186

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.

SIGNATURE: YARA MAZZA PD 05/01/2006
Electronic Signature of Signing Officer or Director Date