

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000098610

FILED  
May 01, 2009  
Secretary of State

Entity Name: MALIBU TRAVEL & TOURS, INC.

## Current Principal Place of Business:

5102 N ARMENIA AVE  
TAMPA, FL 33603 US

## New Principal Place of Business:

## Current Mailing Address:

6931 WILDWOOD OAK DR  
TAMPA, FL 33617 US

## New Mailing Address:

FEI Number: 20-3144912

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GONZALEZ, CLAUDIA  
6931 WILDWOOD OAK DR  
TAMPA, FL 33617 US

## Name and Address of New Registered Agent:

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:

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: P, D ( ) Delete  
Name: GONZALEZ, CLAUDIA  
Address: 6931 WILDWOOD OAK DR  
City-St-Zip: TAMPA, FL 33617 US

Title: V, D ( ) Delete  
Name: VARGAS, RODRIGO  
Address: 6931 WILDWOOD OAK DR  
City-St-Zip: TAMPA, FL 33617 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CLAUDIA GONZALEZ

P.D

05/01/2009

Electronic Signature of Signing Officer or Director

Date