

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000103634

FILED
Aug 14, 2006
Secretary of State

Entity Name: TRAVEL MARKETING & MEDIA SERVICES, INC.

Current Principal Place of Business:

2711 NORTH PINE ISLAND RD #303
SUNRISE, FL 33322

New Principal Place of Business:

Current Mailing Address:

2711 NORTH PINE ISLAND RD #303
SUNRISE, FL 33322

New Mailing Address:

6100 S. FALLS CIRCLE DRIVE
UNIT 311
FT LAUDERDALE, FL 33319

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

A1A REGISTERED AGENT INC.
92 SADBERRY ROAD
QUINCY, FL 32351 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: DP () Delete
Name: THOMPSON, TIFFANY
Address: 2711 NORTH PINE ISLAND RD #303
City-St-Zip: SUNRISE, FL 33322

Title: DV (X) Delete
Name: BURROWS, ADRIAN
Address: 2711 NORTH PINE ISLAND RD #303
City-St-Zip: SUNRISE, FL 33322

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: THOMPSON, TIFFANY
Address: 2711 NORTH PINE ISLAND RD #303
City-St-Zip: SUNRISE, FL 33322

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

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: TIFFANY THOMPSON

DP

08/14/2006

Electronic Signature of Signing Officer or Director

_____ Date