## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000120179

Entity Name: E-FAMTRIPS, INC.

FILED Mar 24, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

Current Mailing Address: New Mailing Address:

FEI Number: 20-3387737 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KRITZLER, RONALD
19195 MYSTIC POINTE DR
UNIT 503
MIAMI, FL 33180 US

KRITZLER, RONALD
3330 NE 190TH ST
#2511
MIAMI, FL 33180 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: 03/24/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST () Delete Title: () Change () Addition Name: KRITZLER, RONALD Name:

Address: 3330 NE 190TH ST #2511 Address: City-St-Zip: MIAMI, FL 33180 US City-St-Zip:

 Name:
 KRITZLER, RONALD
 Name:
 KRITZLER, RONALD

 Address:
 19195 MYSTIC POINTE DR UNIT 503
 Address:
 3330 NE 190TH ST #2511

 City-St-Zip:
 MIAMI, FL 33180 US
 City-St-Zip:
 MIAMI, FL 33180 US

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: RONALD KRITZLER PRES 03/24/2009