2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000143016

Name:

Address:

City-St-Zip:

DENISE, ADAM

4563 WETHERBEE ROAD

ORLANDO, FL 32824

FILED Feb 25, 2009 Secretary of State

Entity Na	me: TOURS	BY DREAM COACH INC.			
Current P	rincipal Plac	e of Business:	New Principal Place of Business:		
	HERBEE RO D, FL 32824	AD			
Current Mailing Address:			New Mailing Address:		
	HERBEE RO), FL 32824	AD			
FEI Number	: 20-3665093	FEI Number Applied For ()	FEI Number Not Appli	cable () Certificate of Status Desired ()	
Name and	l Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:	
4563 WET	RO, CLAUDIC HERBEE RO), FL 32824				
	named entity e of Florida.	submits this statement for the p	ourpose of changing its	s registered office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
Election Car	mpaign Financir	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	ALEJANDRO, 4563 WETHEI ORLANDO, FL	RBEE ROAD 32824	Title: Name: Address: City-St-Zip:	P (X) Change () Addition ALEJANDRO, CLAUDIO 4563 WETHERBEE ROAD ORLANDO, FL 32824	
Title:	S () Delete	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: DENISE ADAM S 02/25/2009