2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000153947

Address:

City-St-Zip:

Entity Name: DREAM VACATIONS INTERNATIONAL, INC.

FILED Jan 04, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 220 EAST CENTRAL PARKWAY 780 CARILLON PARKWAY **SUITE 4010** SUITE 100 ALTAMONTE SPRINGS, FL 32701 ST PETERSBURG, FL 33716 **Current Mailing Address: New Mailing Address:** 220 EAST CENTRAL PARKWAY **SUITE 4010** ALTAMONTE SPRINGS, FL 32701 FEI Number: 20-3831662 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: FRIEDBERG, WENDY 220 EAST CENTRAL PARKWAY **SUITE 4010** ALTAMONTE SPRINGS, FL 32701 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: **PRFS** () Change (X) Addition Name: Name: DRAKE, ERIKA MS 106 1ST STREET EAST #101 Address: Address: City-St-Zip: City-St-Zip: TIERRA VERDE, FL 33715 () Delete Title: Title: () Change (X) Addition Name: Name: STOCKWELL, ROBERT MR 615 CALABRE CRESTE PKWY, APT 10B Address: Address: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: City-St-Zip: Title: Title: () Change (X) Addition () Delete CFO ARGOV, URI MR Name: Name: 3742 KILMARNOCK DRIVE Address Address: City-St-Zip: City-St-Zip: APOPKA, FL 32712 Title: () Delete Title: SECY () Change (X) Addition FRIEDBERG, WENDY MS Name: Name:

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.

Address:

City-St-Zip:

640 VIRGINIA DRIVE

WINTER PARK, FL 32789

SIGNATURE: WENDY FRIEDBERG SECY 01/04/2006