

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P07000006918

Entity Name: REY TOURS, INC

**FILED**  
**May 31, 2009**  
**Secretary of State****Current Principal Place of Business:**2302 ANDRE DR.  
LUTZ, FL 33549**New Principal Place of Business:**2331 TOWERY TRAIL  
LUTZ, FL 33549**Current Mailing Address:**2302 ANDRE DR.  
LUTZ, FL 33549**New Mailing Address:**2331 TOWERY TRAIL  
LUTZ, FL 33549

FEI Number: 20-8272702

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**GONZALEZ, REYNALDO  
2302 ANDRE DR.  
LUTZ, FL 33549 US**Name and Address of New Registered Agent:**GONZALEZ, REYNALDO  
2331 TOWERY TRAIL  
LUTZ, FL 33549 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

05/31/2009

Date

**OFFICERS AND DIRECTORS:**Title: PT ( ) Delete  
Name: GONZALEZ, REYNALDO  
Address: 2302 ANDRE DR.  
City-St-Zip: LUTZ, FL 33549**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PT (X) Change ( ) Addition  
Name: GONZALEZ, REYNALDO  
Address: 2331 TOWERY TRAIL  
City-St-Zip: LUTZ, FL 33549

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: REYNALDO GONZALEZ

Electronic Signature of Signing Officer or Director

PRES

05/31/2009

Date