

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000101325

FILED  
May 29, 2009  
Secretary of State

Entity Name: MULTISERVICES & TOURS, INC.

## Current Principal Place of Business:

9380 SUNRISE LAKES BLV, APT 205 BLD 116  
SUNRISE, FL 33322

## New Principal Place of Business:

## Current Mailing Address:

9380 SUNRISE LAKES BLV, APT 205 BLD 116  
SUNRISE, FL 33322

## New Mailing Address:

FEI Number: 26-0890408

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OSPITIA, MANUEL J.  
2152 SW 98 PLACE  
MIAMI, FL 33165 US

## Name and Address of New Registered Agent:

OSPITIA, MANUEL J.  
9380 SUNRISE LAKES BLVD  
APT 205 BLDG 116  
SUNRISE, FL 33322 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: MANUEL J. OSPITIA

05/29/2009

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: OSPITIA, MANUEL J.  
Address: 2152 SW 98 PLACE  
City-St-Zip: MIAMI, FL 33165

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: OSPITIA, MANUEL J.  
Address: 9380 SUNRISE LAKES BLVD APT 205 BLDG 116  
City-St-Zip: SUNRISE, FL 33322

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: MANUEL J. OSPITIA

PD

05/29/2009

Electronic Signature of Signing Officer or Director

Date