

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000102604

Entity Name: TRAVEL PARADISE, INC.

FILED
May 29, 2009
Secretary of State

Current Principal Place of Business:

6900 W 32 AVE
SUITE 10
HIALEAH, FL 33018

New Principal Place of Business:

8524 SW 40 ST
MIAMI, FL 33155

Current Mailing Address:

2449 SW 117 AVE
MIAMI, FL 33175

New Mailing Address:

FEI Number: 26-0893778

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASTILLO, ZULIA
2449 SW 117 AVE
MIAMI, FL 33175 US

Name and Address of New Registered Agent:

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

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: P () Delete
Name: CASTILLO, ZULIA
Address: 2449 SW 117 AVE
City-St-Zip: MIAMI, FL 33175

Title: VP () Delete
Name: GUZMAN, PABLO
Address: 2449 SW 117 AVE
City-St-Zip: MIAMI, FL 33175

Title: SEC () Delete
Name: HERNANDEZ, GEORGETTE
Address: 2449 SW 117 AVE
City-St-Zip: MIAMI, FL 33175

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SEC (X) Change () Addition
Name: HERNANDEZ, GEORGETTE
Address: 2550 SW 117 CT
City-St-Zip: MIAMI, FL 33175

Title: T () Change (X) Addition
Name: CASTILLO, EZEQUIEL A
Address: 2449 SW 117 AVE
City-St-Zip: MIAMI, FL 33175

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: ZULIA CASTILLO

P

05/29/2009

Electronic Signature of Signing Officer or Director

Date