

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000124539

Entity Name: ESCAPE VACATIONS, INC

FILED
Feb 02, 2009
Secretary of State

Current Principal Place of Business:

8405 NW 53RD ST
STE A205
DORAL, FL 33166 US

Current Mailing Address:

8405 NW 53RD ST
STE A205
DORAL, FL 33166 US

New Principal Place of Business:

8410 NW 53RD TERRACE
STE 121
DORAL, FL 33166 US

New Mailing Address:

PO BOX 523237
MIAMI, FL 331523237 US

FEI Number: 26-1434235

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHACIN, DOUGLAS
8405 NW 53RD ST
STE A205
DORAL, FL 33166 US

Name and Address of New Registered Agent:

CHACIN, DOUGLAS
8410 NW 53RD TERRACE
STE 121
DORAL, FL 33166 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: DOUGLAS CHACIN

02/02/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CHACIN, DOUGLAS
Address: 8405 NW 53RD ST STE A205
City-St-Zip: DORAL, FL 33166 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CHACIN, DOUGLAS
Address: 8410 NW 53RD TERRACE STE 121
City-St-Zip: DORAL, FL 33166 US

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: DOUGLAS CHACIN

P

02/02/2009

Electronic Signature of Signing Officer or Director

Date