

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000036937

**FILED**  
**Mar 31, 2010**  
**Secretary of State**

**Entity Name:** VIA CUBA TRAVEL & SERVICES, INC

**Current Principal Place of Business:**

5934 NW KETONA CIR  
PORT SAINT LUCIE, FL 34986

**New Principal Place of Business:**

1848 SHOWER TREE WAY  
WELLINGTON, FL 33414

**Current Mailing Address:**

5934 NW KETONA CIR  
PORT SAINT LUCIE, FL 34986

**New Mailing Address:**

1848 SHOWER TREE WAY  
WELLINGTON, FL 33414

**FEI Number:** 26-4757317

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEON, OSNIEL  
5934 NW KETONA CIR  
PORT SAINT LUCIE, FL 34986 US

**Name and Address of New Registered Agent:**

LEON, OSNIEL  
1848 SHOWER TREE WAY  
WELLINGTON, FL 33414 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: OSNIEL

03/31/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P  
Name: LEON, OSNIEL  
Address: 1848 SHOWER TREE WAY  
City-St-Zip: WELLINGTON, FL 33414

Title: P  
Name: LEON, OSNIEL  
Address: 1848 SHOWER TREE WAY  
City-St-Zip: WELLINGTON, FL 33414

I hereby 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 all other like empowered.

SIGNATURE: OSNIEL

P

03/31/2010

Electronic Signature of Signing Officer or Director

Date