

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000036937

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

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

**Current Principal Place of Business:**

2198 W PALMA CIR  
WEST PALM BEACH, FL 33415

**New Principal Place of Business:**

**Current Mailing Address:**

2198 W PALMA CIR  
WEST PALM BEACH, FL 33415

**New Mailing Address:**

**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  
2198 W PALMA CIR  
WEST PALM BEACH, FL 33415 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: LEON, OSNIEL  
Address: 2198 W PALMA CIR  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: MTG  
Name: LEON, NORA  
Address: 2198 W PALMA CIR  
City-St-Zip: WEST PALM BACH, FL 33415

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: NORA LEON

VP

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date