

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
 Fax Number : (850) 617-6380

From:

Account Name : AMBAR DIAZ, P.A.
 Account Number : I20110000016
 Phone : (305) 476-8100
 Fax Number : (305) 476-8788

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: leon.coralis@yahoo.com

REGISTERED AGENT CHANGE
WORLD TRAVEL CUBA. CORP

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

RA Change

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Corporate Filing Menu

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: WORLD TRAVEL CUBA. CORP
Name of Corporation

DOCUMENT NUMBER: P11000048317

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

AMBAR DIAZ, ESQ.
Name of Contact Person

AMBAR DIAZ, P.A.
Firm/Company

782 NW 42 AVENUE SUITE 434
Address

MIAMI, FL 33126
City/State and Zip Code

leon.coralis@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

AMBAR DIAZ, ESQ. at (305) 476-8100
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: WORLD TRAVEL CUBA. CORP
2. The principal office address: 4005 E. 4 AVENUE, HIALEAH FL 33013
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 05/20/2011 Document number: P11000048317
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

ANIBAL LEON7000 BAMBOOMIAMI LAKES, FL 33014 US

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):


CORALIS LEON LARA4005 E 4 AVENUE

P.O. Box NOT acceptable

HIALEAH, FL 33013 US

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.




Signature of an officer or director

CORALIS LEON-LARA, PRESIDENT

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.



Signature of Registered Agent

8/3/2011

Date

If signing on behalf of an entity:

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Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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TALLAHASSEE, FLORIDA