## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P92000003482

Entity Name: ABOVE AND BEYOND TRAVEL AGENCY, INC.

FILED Jul 07, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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165 HWY 64 WEST

SUITE 2

HAYESVILLE, NC 28904 US

Current Mailing Address: New Mailing Address:

16969 NW 67TH AVENUE, SUITE #205 P.O. BOX 757

MIAMI, FL 33015 US ROSSVILLE, GA 30741 US

FEI Number: 59-3150176 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CASCA, DIANE CASCA, DIANE N
2330 SOUTHLAND ROAD 2917 S. ATLANTIC AVENUE

MOUNT DORA, FL 32757 US

201

DAYTONA BEACH SHORES, FL 32118 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: DIANE N. CASCA 07/07/2004

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S () Delete Title: S (X) Change () Addition

Name: CASCA, DIANE Name: CASCA, DIANE N

Address: 9217 S. ATLANTIC AVE., UNIT 201 Address: 2917 S. ATLANTIC AVE., UNIT 201
City-St-Zip: DAYTONA BEACH SHORES, FL 32118 City-St-Zip: DAYTONA BEACH SHORES, FL 32118 US

Title: P ( ) Delete Title: P (X) Change ( ) Addition

Name: BROWN, COLLETTE P Name: BROWN, COLLETTE P

Address: 9217 S. ATLANTIC AVE., UNIT 201 Address: 2917 S. ATLANTIC AVE., UNIT 803
City-St-Zip: DAYTONA BEACH SHORES, FL 32118 City-St-Zip: DAYTONA BEACH SHORES, FL 32118 US

Title: C ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MILLER, KARÉN
 Name:

 Address:
 4040 NE DIXIE HWY
 Address:

 City-St-Zip:
 PALM BAY, FL 32905
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DIANE N. CASCA S 07/07/2004