

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Sep 09, 2005 08:00 AM  
Secretary of State

DOCUMENT # P93000041248

1. Entity Name

GLOBAL TRAVEL SERVICES, INC.



Principal Place of Business

3333 NE 34TH ST  
SUITE 404  
FT. LAUDERDALE FL 33308  
US

Mailing Address

3333 NE 34TH ST  
SUITE 404  
FT. LAUDERDALE FL 33308  
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

2nd MOORE

CR2E034 (5/05)

4. FEI Number 65-0436789

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LENT, MONIKA  
3333 NE 34TH ST  
SUITE 404  
FT LAUDERDALE FL 33308

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00  
DUE BY September 7, 2005

Make Check Payable to Florida Department of State

S.607 193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☒

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (N. 1)

TITLE P ☐ Delete  
NAME LENT, MONIKA  
STREET ADDRESS 3333 NE 34TH ST, SUITE 404  
CITY- ST- ZIP FT. LAUDERDALE FL 33308

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 000000378089  
CITY- ST- ZIP 09/09/05-80004-018 158.75

TITLE VP ☐ Delete  
NAME BECKER, SABINA M  
STREET ADDRESS 5301 SHERWOOD DR.  
CITY- ST- ZIP CLEVELAND OH 44126

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE S ☐ Delete  
NAME BECKER, JEFFRY  
STREET ADDRESS 5301 SHERWOOD DRIVE  
CITY- ST- ZIP CLEVELAND OH 44126

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Monika Lent Monika LENT Sept 7 2005 954-567-3578