

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000057719

Entity Name: CSF TRAVEL, INC.

FILED
May 08, 2008
Secretary of State

Current Principal Place of Business:

1 SW 129TH AVE
SUITE 107
PEMBROKE PINES, FL 33027

New Principal Place of Business:

11627 RAMBLING OAK BLVD
ORLANDO, FL 32832

Current Mailing Address:

1 SW 129TH AVE
SUITE 107
PEMBROKE PINES, FL 33027

New Mailing Address:

11627 RAMBLING OAK BLVD
ORLANDO, FL 32832

FEI Number: 65-0434935

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOLKINS, CHRISTINE
1 SW 129TH AVE
SUITE 107
PEMBROKE PINES, FL 33027 US

Name and Address of New Registered Agent:

FOLKINS, CHRISTINE
11627 RAMBLING OAK BLVD
ORLANDO, FL 32832 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:

05/08/2008

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:

Title: D () Delete
Name: FOLKINS, CHRISTINE
Address: 1 SW 129TH AVE SUITE 107
City-St-Zip: PEMBROKE PINES, FL 33027

Title: D () Delete
Name: SHILLUS, ERNST
Address: 1 SW 129TH AVE SUITE 107
City-St-Zip: PEMBROKE PINES, FL 33027

Title: D () Delete
Name: SHILLUS, ADELHEID
Address: 1 SW 129TH AVE SUITE 107
City-St-Zip: PEMBROKE PINES, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FOLKINS, CHRISTINE
Address: 11627 RAMBLING OAK BLVD
City-St-Zip: ORLANDO, FL 32832

Title: D (X) Change () Addition
Name: SHILLUS, ERNST
Address: 11627 RAMBLING OAK BLVD
City-St-Zip: ORLANDO, FL 32832

Title: D (X) Change () Addition
Name: SHILLUS, ADELHEID
Address: 11627 RAMBLING OAK BLVD
City-St-Zip: ORLANDO, FL 32832

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: CHRISTINE FOLKINS

OWNE

05/08/2008

Electronic Signature of Signing Officer or Director

Date