2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2009
Secretary of State

DOCUMENT# P94000006455

Entity Name: TOUR + MED ASSISTANCE, INC.

Current Principal Place of Business:

4691 N. UNIVERSITY DR.
3411
CORAL SPRINGS, FL 33067 US

New Principal Place of Business:

5944 CORAL RIDGE DRIVE
207
CORAL SPRINGS, FL 33076 US

Current Mailing Address:

4630 N. UNIVERSITY DR
#411
CORAL SPRINGS, FL 33067 US

New Mailing Address:

5944 CORAL RIDGE DRIVE
207
CORAL SPRINGS, FL 33076 US

FEI Number: 65-0462738 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAPIERRE, REJEAN
7800 W OAKLAND PARK BLVD.
BUILDING G
SUNRISE, FL 33351 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: PROVENCHER, DANIEL L
Address: 4630 N. UNIVERSITY DR #411
City-St-Zip: CORAL SPRINGS, FL 33067

Title: VP ( ) Delete
Name: PROVENCHER, LOUISE
Address: 4630 N. UNIVERSITY DR
City-St-Zip: CORAL SPRINGS, FL 33067

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: PROVENCHER, DANIEL L
Address: 5014 KENSINGTON CIRCLE
City-St-Zip: CORAL SPRINGS, FL 33076

Title: VP (X) Change ( ) Addition
Name: PROVENCHER, LOUISE
Address: 5014 KENSINGTON CIRCLE
City-St-Zip: CORAL SPRINGS, FL 33076

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: DANIEL PROVENCHER P 04/14/2009

Electronic Signature of Signing Officer or Director Date