

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000013483

**FILED**  
**Jan 10, 2012**  
**Secretary of State**

**Entity Name:** V. I. P. TRAVEL RESERVATIONS, INC.

**Current Principal Place of Business:**

4606 SOUTH CLYDE MORRIS BLVD  
SUITE 1P  
PORT ORANGE, FL 32129 US

**New Principal Place of Business:**

**Current Mailing Address:**

4606 SOUTH CLYDE MORRIS BLVD  
SUITE 1P  
PORT ORANGE, FL 32129 US

**New Mailing Address:**

**FEI Number:** 65-0468555

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

JOHNSON MCCOLUM, JULIE  
4606 SOUTH CLYDE MORRIS BLVD  
SUITE 1-P  
PORT ORANGE, FL 32129 US

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

JOHNSON, JULIE  
4606 SOUTH CLYDE MORRIS BLVD  
SUITE 1-P  
PORT ORANGE, FL 32129 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: JULIE JOHNSON

01/10/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: JOHNSON, JULIE  
Address: 4606 SOUTH CLYDE MORRIS BLVD  
City-St-Zip: PORT ORANGE, FL 32129

I hereby 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 all other like empowered.

SIGNATURE: JULIE JOHNSON

MS

01/10/2012

Electronic Signature of Signing Officer or Director

Date