

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2005 08:00 AM
Secretary of State

DOCUMENT # P94000051362
 1. Entity Name
 FIESTA SPORTS AND TRAVEL, INC.



Principal Place of Business Mailing Address
 2784 CHAPARRAL DR 2784 CHAPARRAL DR
 MELBOURNE, FL 32934 MELBOURNE, FL 32934

DO NOT WRITE IN THIS SPACE



04172005 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
 59-3280540 Not Applicable

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

6. Name and Address of Current Registered Agent
 LAWS, KAREN L
 2784 CHAPARRAL DR
 MELBOURNE, FL 32934

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	LOPEZ, JOHN L
STREET ADDRESS	2784 CHAPARRAL DR
CITY-ST-ZIP	MELBOURNE, FL 32934
TITLE	VD
NAME	LAWS, DENNIS E
STREET ADDRESS	2784 CHAPARRAL DR
CITY-ST-ZIP	MELBOURNE, FL
TITLE	POTS
NAME	LAWS, KAREN L
STREET ADDRESS	2784 CHAPARRAL DR
CITY-ST-ZIP	MELBOURNE, FL
TITLE	D
NAME	CHUE, LARRY W
STREET ADDRESS	2784 CHAPARRAL DR.
CITY-ST-ZIP	MELBOURNE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify 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 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: Dennis E. Laws DENNIS E. LAWS 15 APR 2005 321-729-2893

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #