2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000055647

Entity Name: TOURICO HOLIDAYS, INC.

FILED Apr 29, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

220 EAST CENTRAL PARKWAY

SUITE # 4000

ALTAMONTE SPRINGS, FL 32701 US

Current Mailing Address: New Mailing Address:

220 EAST CENTRAL PARKWAY SUITE # 4000

ALTAMONTE SPRINGS, FL 32701 US

FEI Number: 59-3260171 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ARGOV, URI 220 EAST CENTRAL PARKWAY SUITE 4000 ALTAMONTE SPRINGS, FL 32701 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: [

Name: ARGOV, URI

Address: 220 EAST CENTRAL PARKWAY
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: [

Name: GINIO, ASI

Address: 220 E CENTRAL PKWY STE 4000 City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: C

Name: ARGOV, URI CEO

Address: 220 EAST CENTRAL PARKWAY, SUITE # 4000

City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: C

Name: FRIEDBERG, WENDY SECY

Address: 220 EAST CENTRAL PARKWAY, SUITE # 4000

City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: C

Name: FISCHER, ROBERT CFO

Address: 220 EAST CENTRAL PARKWAY, SUITE # 4000

City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: URI ARGOV D 04/29/2011