

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000024535

FILED
Apr 25, 2005
Secretary of State

Entity Name: CB TOURISM & REPRESENTATION INCORPORATED

Current Principal Place of Business:

519 B. JONES AVENUE
SUITE 3 AND 4
HAINES CITY, FL 33844 US

New Principal Place of Business:

1344 GRAND RESERVE DR
DAVENPORT, FL 33837 US

Current Mailing Address:

519 B. JONES AVENUE
SUITE 3 AND 4
HAINES CITY, FL 33844 US

New Mailing Address:

1344 GRAND RESERVE DR
DAVENPORT, FL 33837 US

FEI Number: 59-3305275

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VERDUGA, ALEXIS A
1344 GRAND RESERVE DR.
DAVENPORT, FL 33837 US

Name and Address of New Registered Agent:

VERDUGA, ALEXIES A
1344 GRAND RESERVE DR.
DAVENPORT, FL 33837 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: ALEXIES VERDUGA

04/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: VERDUGA, ALEXIS A
Address: 1344 GRAND RESERVE DR.
City-St-Zip: DAVENPORT, FL 33837

Title: T () Delete
Name: TORRES, JUAN M
Address: 2237 NEWT ST.
City-St-Zip: ORLANDO, FL 32837

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: VERDUGA, ALEXIES A
Address: 1344 GRAND RESERVE DR.
City-St-Zip: DAVENPORT, FL 33837

Title: T (X) Change () Addition
Name: CASTRO, YANIRE S
Address: 1344 GRAND RESERVE DR
City-St-Zip: DAVENPORT, FL 32837

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ALEXIES VERDUGA

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04/25/2005

Electronic Signature of Signing Officer or Director

Date