2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2004
Secretary of State

DOCUMENT# P96000010475

Entity Name: MARZ TRAVEL SERVICES, INC.

Current Principal Place of Business:

17137 PINES BLVD
PEMBROKE PINES, FL 33029

New Principal Place of Business:

Current Mailing Address:

17137 PINES BLVD
PEMBROKE PINES, FL 33029

New Mailing Address:

17137 PINES BLVD
PEMBROKE PINES, FL 33027

FEI Number: 65-0642024 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARZOUCA, JACOB
17137 PINES BLVD
PEMBROKE PINES, FL 33029

Name and Address of New Registered Agent:

MARZOUCA, JACOB
17137 PINES BLVD
PEMBROKE PINES, FL 33027

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: _____ 04/21/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MARZOUCA, DIANA
Address: 14345 NW 15 ST
City-St-Zip: PEMBROKE PINES, FL 33027

Title: D ( ) Delete
Name: MARZOUCA, JACOB
Address: 14345 NW 15 ST
City-St-Zip: PEMBROKE PINES, FL 33027

Title: D ( ) Delete
Name: MARZOUCA, FOUAD
Address: 125 BAGWELL FARM RD
City-St-Zip: SPARTANBURG, SC 29302

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: MARZOUCA, DIANA
Address: 14345 NW 15 ST
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D (X) Change ( ) Addition
Name: MARZOUCA, JACOB
Address: 14345 NW 15 ST
City-St-Zip: PEMBROKE PINES, FL 33028

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JACOB MARZOUCA PRES 04/21/2004
Electronic Signature of Signing Officer or Director — Date