

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000010475

Entity Name: MARZ TRAVEL SERVICES, INC.

FILED  
Apr 04, 2005  
Secretary of State

## Current Principal Place of Business:

17137 PINES BLVD  
PEMBROKE PINES, FL 33029

## New Principal Place of Business:

17137 PINES BLVD  
PEMBROKE PINES, FL 33027

## Current Mailing Address:

17137 PINES BLVD  
PEMBROKE PINES, FL 33027

## New Mailing Address:

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 33027      US

## Name and Address of New Registered Agent:

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

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 33028

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

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, JACOB  
Address: 14345 NW 15 ST  
City-St-Zip: PEMBROKE PINES, FL 33028

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

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

04/04/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date