

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000038071

Entity Name: DESTINATIONS PLUS, INC.

FILED  
Apr 15, 2005  
Secretary of State

## Current Principal Place of Business:

25 SE 2ND AVE SUITE 1135  
SUITE 4920  
MIAMI, FL 33131 US

## Current Mailing Address:

25 SE 2ND AVE SUITE 1135  
SUITE 4920  
MIAMI, FL 33131 US

## New Principal Place of Business:

350 SOUTH COUNTY RD,  
SUITE 102  
PALM BEACH, FL 33480 US

## New Mailing Address:

350 SOUTH COUNTY RD.  
SUITE 102  
PALM BEACH, FL 33480 US

FEI Number: 65-0671360

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HERMELEE, BRUCE G  
25 SE 2ND AVE SUITE 1135  
SUITE 4920  
MIAMI, FL 33131 US

## Name and Address of New Registered Agent:

HERMELEE, ELIZABETH  
350 SOUTH COUNTY RD  
SUITE 102  
PALM BEACH, FL 33480 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: ELIZABETH HERMELEE

04/15/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: HERMELEE, ELIZABETH  
Address: 25 S E 2ND AVE SUITE 1135  
City-St-Zip: MIAMI, FL 33131

Title: D ( ) Delete  
Name: GOTTLIEB, NORMAN  
Address: 25 SW 2ND AVE SUITE 1135  
City-St-Zip: MIAMI, FL 33131

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change ( ) Addition  
Name: HERMELEE, ELIZABETH  
Address: 350 SOUTH COUNTY RD., SUITE 102  
City-St-Zip: PALM BEACH, FL 33480

Title: O (X) Change ( ) Addition  
Name: GOTTLIEB, NORMAN  
Address: 350 SOUTH COUNTY RD., SUITE 102  
City-St-Zip: PALM BEACH, FL 33480

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: ELIZABETH HERMELEE

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04/15/2005

Electronic Signature of Signing Officer or Director

Date