
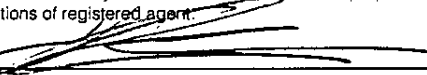
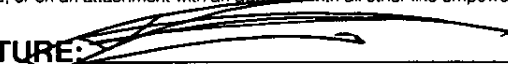


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

<b>DOCUMENT # P96000053978</b> 1. Entity Name <b>TRAVEL CONNECTION OF NORTH AMERICA, INC.</b>						<b>FILED</b> <b>06 SEP 25 AM 11:22</b> SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business <b>1211 N. STATE RD. #7 HOLLYWOOD, FL 33021</b>				Mailing Address <b>1211 N. STATE RD. #7 HOLLYWOOD, FL 33021</b>			
2. Principal Place of Business Suite, Apt. #, etc.				3. Mailing Address Suite, Apt. #, etc.			
City & State Zip      Country				4. FEI Number <b>65-0675606</b>			
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For Not Applicable			
<b>6. Name and Address of Current Registered Agent</b>  <b>LEON, RAMON</b> <b>1211 N. STATE RD. #7</b> <b>HOLLYWOOD, FL 33021</b>				<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code			
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE  <small>Signature, typed or printed name of registered agent and title if applicable.</small>				DATE <b>9/11/06</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>			
<b>FILE NOW!!! FEE IS \$550.00</b> <b>Due by September 15, 2006</b>				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>				<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>LEON, RAMON</b> <b>1211 N. STATE RD. #7</b> <b>HOLLYWOOD, FL 33021</b>			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>000080270050</b> <b>09/28/06--01053--021 **150.00</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.							
SIGNATURE  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				DATE <b>9/11/06</b> <small>Daytime Phone #</small>			

**T**RAVEL CONNECTION  
of NORTH AMERICA, INC.

1211 N. State Road #7 (441)

Hollywood, Florida 33021

TEL: (954) 986-0801 (954) 986-0810

FAX: (954) 986-0312



8/29/06

TO FLORIDA DEPT OF CORP.  
TRAVEL CONNECTION OF NA  
DOCUMENT P97000036421

To whom may CONCERN:

On 3/20/06 I send my  
check # 3844 FOR my CORP  
RENEWAL AND AS OF YET  
IT HAS NOT BEING CASHED  
BY FLORIDA DEPT OF CORP  
PLEASE RECTON THIS matter  
OF CORP RENEWAL

Yours