

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000067684

FILED
Jan 21, 2006
Secretary of State

Entity Name: MICDAN TRAVEL, INC.

Current Principal Place of Business:

3300 UNIVERSITY DRIVE, SUITE 602
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

1304 SW 160TH AVE #109
FORT LAUDERDALE, FL 33326

New Mailing Address:

FEI Number: 65-0691038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAGEN, MAX M ESQUIRE
3990 SHERIDAN STREET
SUITE 104
HOLLYWOOD, FL 33021 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: PD () Delete
Name: ALLENSWORTH, MICHAEL
Address: 3300 UNIVERSITY DR #602
City-St-Zip: CORAL SPRINGS, FL 33065

Title: STD () Delete
Name: ALLENSWORTH, DANA
Address: 3300 UNIVERSITY DR #602
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 Chapter 119, 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: MICHAEL ALLENSWORTH

PD

01/21/2006

Electronic Signature of Signing Officer or Director

_____ Date