

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000092684

FILED  
Apr 27, 2004  
Secretary of State

**Entity Name:** AEROPOSTAL DESTINATIONS TRAVEL AGENCY INC.

**Current Principal Place of Business:**

1101 BRICKELL AVENUE  
NORTH TOWER STE 500  
MIAMI, FL 33131

**New Principal Place of Business:**

2601 NW 105TH AVENUE  
MIAMI, FL 33172

**Current Mailing Address:**

1101 BRICKELL AVENUE  
NORTH TOWER STE 500  
MIAMI, FL 33131

**New Mailing Address:**

2601 NW 105TH AVENUE  
MIAMI, FL 33172

**FEI Number:** 65-0709704

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

VELAZQUEZ, HAYDHELEN  
7444 MONACO STREET  
CORAL GABLES, FL 33143 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:** PVD ( ) Delete  
**Name:** LLAURADO, RAMON  
**Address:** 10540 NW 26TH, SUITE 103  
**City-St-Zip:** MIAMI, FL 33172

**Title:** STD ( ) Delete  
**Name:** GOYES, SYLVIA  
**Address:** 11284 SW 91 TERRACE  
**City-St-Zip:** MIAMI, FL 33176

**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 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:** RAMON LLAURADO

P

04/27/2004

Electronic Signature of Signing Officer or Director

Date