

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000062274

Entity Name: TRAVEL MTA, INC.

FILED
Apr 30, 2005
Secretary of State

Current Principal Place of Business:

23340 BUTTERFLY PALM COURT
BOCA RATON, FL 33433

New Principal Place of Business:

21452 BRIDGE VIEW DRIVE
BOCA RATON, FL 33428

Current Mailing Address:

23340 BUTTERFLY PALM COURT
BOCA RATON, FL 33433

New Mailing Address:

21452 BRIDGE VIEW DRIVE
BOCA RATON, FL 33428

FEI Number: 65-0854296

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 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: MICHAELSON, E R
Address: 23340 BUTTERFLY PALM COURT
City-St-Zip: BOCA RATON, FL 33433

Title: VSTD () Delete
Name: MICHAELSON, ANNE L
Address: 23340 BUTTERFLY PALM COURT
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MICHAELSON, E R
Address: 21452 BRIDGE VIEW DRIVE
City-St-Zip: BOCA RATON, FL 334328

Title: VSTD (X) Change () Addition
Name: MICHAELSON, ANNE L
Address: 21452 BRIDGE VIEW DRIVE
City-St-Zip: BOCA RATON, FL 334328

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: ANNE MICAELSON

VSTD

04/30/2005

Electronic Signature of Signing Officer or Director

Date