

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000072146

Entity Name: TRAVEL BY BONNIE, INC.

FILED
Apr 23, 2009
Secretary of State

Current Principal Place of Business:

TRAVELEADERS
9569 TAVERNIER DR
BOCA RATON, FL 33496

New Principal Place of Business:

WORLDVIEW TRAVEL
621 VILLA PARK RD
POINCIANA, FL 34759

Current Mailing Address:

TRAVELEADERS
9569 TAVERNIER DR
BOCA RATON, FL 33496

New Mailing Address:

FEI Number: 65-0858611 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:

GODEL, ESTHER B
621 VILLA PARK RD
POINCIANA, FL 33459 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: ESTHER BONNIE GODEL 04/23/2009

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: GODEL, ESTHER B
Address: 9569 TAVERNIER DR
City-St-Zip: BOCA RATON, FL 33496

Title: SVD (X) Delete
Name: GODEL, CLIFFORD A
Address: 9569 TAVERNIER DR
City-St-Zip: BOCA RATON, FL 33496

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: GODEL, ESTHER B
Address: 621 VILLA PARK RD
City-St-Zip: POINCIANA, FL 34759

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ESTHER BONNIE GODEL MS 04/23/2009

Electronic Signature of Signing Officer or Director Date