

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000012390

Entity Name: CLIKTRAVEL.COM, INC.

FILED
Apr 23, 2008
Secretary of State

Current Principal Place of Business:

110 E BROWARD BLVD
10TH FLOOR
FORT LAUDERDALE, FL 33301

Current Mailing Address:

110 E BROWARD BLVD
10TH FLOOR
FORT LAUDERDALE, FL 33301

FEI Number: 65-0897669

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

New Principal Place of Business:

110 E BROWARD BLVD
14TH FLOOR
FORT LAUDERDALE, FL 33301

New Mailing Address:

110 E BROWARD BLVD
14TH FLOOR
FORT LAUDERDALE, FL 33301

Name and Address of Current Registered Agent:

SMITH, DENNIS D
C/O TRIPP SCOTT
110 SE 6TH STREET, 15TH FLOOR
FORT LAUDERDALE, FL 33301 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: CD () Delete
Name: EGAN, MICHAEL S
Address: 110 E BROWARD BLVD
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: PTD () Delete
Name: ALLEN, CELESTE V
Address: 110 E BROWARD AVE
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: S () Delete
Name: TRIPP, NORMAN D
Address: 110 SE 6 STREET
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VP () Delete
Name: DAVISON, NICHOLAS
Address: 110 E BROWARD BLVD
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: LEBOWITZ, ROBIN
Address: 110 E BROWARD AVE
City-St-Zip: FORT LAUDERDALE, FL 33301

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 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: NDAVISON

VP

04/23/2008

Electronic Signature of Signing Officer or Director

_____ Date