2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000035909

Entity Name: TRAVELLINK SERVICES INC

FILED Apr 21, 2006 Secretary of State

Littly Na	IIIC. IKAVEL	LINK SERVICES, INC.			
Current Principal Place of Business:			New Principal Place of Business:		
1511 N WI SUITE 250 TAMPA, F		/D			
Current Mailing Address:			New Mailing Address:		
1511 N WI SUITE 250 TAMPA, F		/D			
FEI Number	: 59-3573196	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
SUITE 220	ESTSHORE E	sLVD. #250			
	e named entity e of Florida.	submits this statement for the	purpose of changing its register	ed office or registered agent, or both,	
SIGNATUI					
		nic Signature of Registered Ag	gent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CARAPELLA, C	SHORE BLVD SUITE #250	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	LEE, BRIAN M	Delete SHORE BLVD SUITE #250 607	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PUMA, KEVIN I	SHORE BLVD SUITE #250	Title: Name: Address: City-St-Zip:	() Change() Addition	

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: THOMAS R. HANLEY CONT 04/21/2006