2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000088032

Entity Name: GASPA TRAVEL, INC.

FILED Apr 10, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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529 NE 1ST AVE C/O GREYHOUND OCALA, FL 34470

Current Mailing Address: New Mailing Address:

529 NE 1ST AVE C/O GREYHOUND OCALA, FL 34470

FEI Number: 59-3601179 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:

ZARATE, MARIO 2301 SE 24TH AVE OCALA, FL 34471 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 ZARATE, MARIO
 Name:
 ZARATE, MARIO M

 Address:
 2301 SE 24TH AVE
 Address:
 2301 SE 24TH AVE

 City-St-Zip:
 OCALA, FL 34471
 City-St-Zip:
 OCALA, FL 34471

Title: VS () Delete Title: VS (X) Change () Addition

 Name:
 ZARATE, LUÈLLA
 Name:
 ZARATE, LUÈLLA

 Address:
 2626 SE 15TH STREET
 Address:
 2333 SE 19TH CIR

 City-St-Zip:
 OCALA, FL 34471
 City-St-Zip:
 OCALA, FL 34471

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: MARIO ZARATE PD 04/10/2008