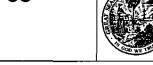
2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P99000098763 **DOCUMENT #**

1. Entity Name T&L TRAVEL, INC.



FILED Apr 16, 2003 8:00 am Secretary of State

04-16-2003 90164 045 ***150.00

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Principal Place of Business 1818 W. WATERS AVENUE 1818 W. WATERS AVENUE TAMPA FL 33604 Mailing Address 1818 W. WATERS AVENUE TAMPA FL 33604									11 2) (201) (201 2		
2. Principal F	Place of Business	3. Mailing Address				-	1 1881 881 178 1811 1811 8811 8811				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES				
City & Star	te	City & State				4.	4. FEI Number 59-3608804			Applied For Not Applicable	
Zip	. Country .	Zip		ntry				\$8.75 Add Fee Require	75 Additional Required		
	6. Name and Address of Current	Registere	legistered Agent			7. Name and Address of New Registered Agent]_
·					Name						
GARCIA, N 225 E. RO	Mario a Obinson Street				Street Address (P.O. Box Number is Not Acceptable)						-
SUITE 540			•								1
ORLANDO	FL 32801				City			FL	Zip Cod	le	7
	named entity submits this statement for tions of registered agent.	r the purpo	ose of changing its	register	ed office or registe	ered ag	gent, or both, in the State of Florid	da. Iam f	amiliar with,	and accept	1
SIGNATURE	Signature, typed or printed name of registered agent	and title if appli	icable. (NOT	E: Registere	d Agent signature require	ed when r	einstating)	DATE			
	TILE NOW!!! FEE IS \$150.00			ζ			<u></u>				┨
/ Afte	r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department o	State					9. Election Campaign Finar Trust Fund Contribution.	ncing		00 May Be d to Fees	
10.	OFFICERS AND	DIRECTOR	as /	11.		ΑΓ	DDITIONS/CHANGES TO OFFIC	FRS AND	DIRECTOR	S IN 11	7
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NAME	DUONG, LAN		2 50000	NAM	1				· · · · · · · · · · · · · · · · ·		
STREET ADDRESS	7901 N. FREMONT AVENUE			STRE	ET ADDRESS						
CITY-ST-ZIP	TAMPA FL 33604			CITY	-ST-ZIP						}
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SIGNATURE:

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.