

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V19232

FILED  
Mar 08, 2012  
Secretary of State

**Entity Name:** PRIME TRAVEL SERVICES, INC.

**Current Principal Place of Business:**

2200 NW 92ND AVE  
SECOND FLOOR  
DORAL, FL 33172 US

**New Principal Place of Business:**

**Current Mailing Address:**

2200 NW 92ND AVE  
SECOND FLOOR  
DORAL, FL 33172 US

**New Mailing Address:**

**FEI Number:** 65-0316540

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CAMACHO, ERNESTO  
2200 NW 92ND AVE  
SECOND FLOOR  
DORAL, FL 33172 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: BOLIVAR, JOAQUIN  
Address: 999 PONCE DE LEON BLVD.  
City-St-Zip: CORAL GABLES, FL

Title: STD  
Name: BOLIVAR, ANNIE H  
Address: 999 PONCE DE LEON BLVD.  
City-St-Zip: CORAL GABLES, FL

Title: VP  
Name: BOLIVAR, JOSE R  
Address: 999 PONCE DE LEON BLVD  
City-St-Zip: CORAL GABLES, FL

I hereby 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 all other like empowered.

SIGNATURE: ERNESTO CAMACHO

MR

03/08/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date