

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V40646

FILED
Apr 04, 2005
Secretary of State

Entity Name: ANCHOR AND WINGS TRAVEL INC.

Current Principal Place of Business:

2269 SO. UNIVERSITY DR.
340
DAVIE, FL 33324 US

New Principal Place of Business:

Current Mailing Address:

2269 SO. UNIVERSITY DR.
340
DAVIE, FL 33324 US

New Mailing Address:

FEI Number: 65-0340624 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPELLO URANIA
2269 SO. UNIVERSITY DR.
SUITE # 340
DAVIE, FL 33324 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: D () Delete
Name: CAMPELLO, PHILLIP,
Address: 7420 NW 1ST PLACE
City-St-Zip: PLANTATION, FL 33317 US

Title: D () Delete
Name: CAMPELLO, URANIA,
Address: 7420 NW 1ST PLACE
City-St-Zip: PLANTATION, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 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: URANIA CAMPELLO

D

04/04/2005

Electronic Signature of Signing Officer or Director

Date