2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Jun 23, 2004 8:00 am Secretary of State DOCUMENT # V49079 06-23-2004 90003 016 ***550.00 FIRST CHOICE TRAVEL SERVICES, INC. Principal Place of Business Mailing Address 7083 GRAND NATIONAL DRIVE 7083 GRAND NATIONAL DRIVE #102 ORLANDO FL 32819 ORLANDO FL 32819 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) City & State City & State Applied For 4. FEI Number 59-3136038 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S PINE ISLAND RD PLANTATION FL 33324 Zip Code City FL 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 **PSTD** TITLE ☐ Delete TITLE [] Change ☐ Addition MARQUES NEVES, DENISE NAME NAME 7001 GRAND NATIONAL DRIVE., STE 100 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32810 CITY-ST-ZIP VΡ TITLE ☐ Delete TITLE Change Addition MILNER, MARTIN 7001 GRAND NATIONAL DRIVE STE 100 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32819 CITY-ST-ZIP Delete TITLE TITLE Change ☐ Addition Director NAME THOMAS, HYWEL ----NAME = -PINOS SMIP STREET ADDRESS FIRST CHOICE HOUSE LONDON RD STREET ADDRESS FIRST Choice Mouse, Lundon Rack CITY-ST-ZIP WEST SUSSEX, ENGLAND rh10- 29x CITY-ST-7/P West Sussex, England RM10-29 TITLE ☐ Change ☐ Addition □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 changed, or on an attachment with an address with all other like e

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

and that my signature shall have the same legal effect as if made under oath; that I am an officer or director his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

FILED