

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# M33518

**Entity Name:** LE JEUNE RD. TRAVEL SERVICE INC.

**Current Principal Place of Business:**

16000 NW 7 AVE  
MIAMI, FL 33169

**Current Mailing Address:**

16000 NW 7 AVE  
MIAMI, FL 33169 US

**FEI Number: 59-2682972**

**Certificate of Status Desired: No**

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

CRUZ, FELIX  
782 NW LEJEUNE RD  
SUITE 439  
MIAMI, FL 33126 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

**Officer/Director Detail :**

Title            VP  
Name            KNOWLES, LIVINGSTONE  
Address        8925 NE 9 CT  
City-State-Zip: MIAMI FL 33138

Title            P  
Name            JARAMILLO, NANCY  
Address        610 SW 100 TERRACE  
City-State-Zip: PEMBROKE PINES FL 33025

*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: NANCY JARAMILLO**

**PRESIDENT**

**04/27/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date