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.

PRESIDENT

Electronic Signature of Signing Officer/Director Detail

# 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000070231

Entity Name: ELITE TRAVEL MANAGEMENT GROUP, INC.

#### Current Principal Place of Business:

110 N. PARK AVENUE TARPON SPRINGS, FL 34689

#### **Current Mailing Address:**

35246 US HWY 19 N 329 PALM HARBOR, FL 34684 US

### FEI Number: 59-3470622

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

BLENNER, WALTER W 2708 ALT. 19 NORTH SUITE 701 PALM HARBOR, FL 34683 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

#### **Officer/Director Detail :**

Title	DPST	Title	VP
Name	LEVENT, TAMMY	Name	LEVENT, KATIE
Address	35246 US HWY 19 N 329	Address	35246 US HIGHWAY 19 NORTH 329
City-State-Zip:	PALM HARBOR FL 34684	City-State-Zip:	PALM HARBOR FL 34684

## FILED Mar 02, 2024 Secretary of State 7042509556CC

Certificate of Status Desired: No

03/02/2024 Date

Date