2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

FILED Mar 23, 2007 08:00 AM Secretary of State

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1. Entity Name

HOLIDAY VACATIONS, INC.



Principal Place of Business

1001 EAST ATLANTIC AVE., STE 202 DELRAY BEACH, FL 33483 US

Mailing Address

1000 MARKET ST BLDG 1

PORTSMOUTH, NH 03801

No Chg-P

CR2E034 (11/05)

01042007 4. FEI Number 59-2653860

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CRITCHFIELD, RICHARD H. 1001 E. ATLANTIC AVE.

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DELRAY BEACH, FL 33483		IN THIS SPACE				
	named entity submits this statement for the priors of registered agent	urpose of changing its registere	d office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent and little if	applicable. (NOTE: Registered	Agent signature	required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	000000676117 03/30/07-80046-008 150.00	
10.	OFFICERS AND DIREC	TORS	٠			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BERGER, ANDREW 1001 EAST ATLANTIC AVE., STE 202 DELRAY BEACH, FL 33483 S					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CRITCHFIELD, RICHARD 1001 EAST ATLANTIC AVE., STE 202 DELRAY BEACH, FL 33483					
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12. I hereby of indicated of the cor	pertify that the information supplied with this fill on this report or supplemental report is true are poration or the receiver or trustee empowered	ing tres not qualify for the exe no accurate and that my signate o execute this report as require	mptions cor ure shall haved by Chap	ntained in Chapter 119 ve the same legal effecter 607, Florida Statute	9, Florida Statutes. I further certify that the information of as if made under oath; that I am an officer or director as; and that my name appears in Block 10 or Block 11 if	

changed, or on an attachment w 1/24/07

SIGNATURE: