## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 19, 2008 8:00 am Secretary of State

DOCUMENT # P93000058998  1. Entity Name KENDALL CREDIT AND BUSINESS SERVICE, INC.						02-19-2008	90027 021	***150	0.00
Principal Place of Business Mailing Address				<u> </u>	1				
8500 SW 11	7 RD	6855 RED RD #600			1	•			
5TH FL		RAL GABLES, FL 33143 US							
MIAMI, FL 33183 US					NINN SIKIL NTIIK NEIÜL NNII	FI 8 8 1 8 1 8 11 8 1 1 8 11 8	INTIA 15101 FOI	1981 11 1891	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc			01252008	Chg-P	CR2E034	(12/06)	
City & State		City & State		4. FEI Number 65-0434				plied For t Applicable	
Zip	Country	Zip	Zip Country		5. Certificate of Status Desired See Required \$8.75 Additional Fee Required				
	6. Name and Address of Current	Registered Agent	l	I	7. Name and A	Address of New R			<u>.</u>
		Name							
FRIEDMAN, DAVID R 6855 RED RD #600			Street Address (P.O. Box Number is Not Acceptable)						
	ABLES, FL 33143								
				0::			1	·	
			City			FL	Zip Code		
	named entity submits this statement for tions of registered agent.	or the purpose of changing its	registere	ed office or registe	ered agent, or both	, in the State of Flo	orida. I am fan	niliar with,	and accept :
SIGNATURE									
	Signature, typed or printed name of registered agent	and little if applicable. (NOI	E. Registere	d Agent signature require	d when reinslating)		DATE		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED DAME OF SIGNING OFFICER OR DIRECTOR

2/1/08 186-662-7467