


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-08-2008 90020 001 ***300.00

DOCUMENT # 310459
 1. Entity Name
RECOMMEND TRAVEL PUBLICATIONS, INC.



Principal Place of Business Mailing Address
 5979 NW 151ST ST., #120 5979 NW 151ST ST., #120
 MIAMI LAKES, FL 33014 US MIAMI LAKES, FL 33014 US

DO NOT WRITE IN THIS SPACE



04242008 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
 59-1162158 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
 HERMAN, HAL
 5979 NW 151ST ST., #120
 MIAMI LAKES, FL 33014

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	C
NAME	HERMAN, HAROLD
STREET ADDRESS	5979 NW 151ST ST., #120
CITY-ST-ZIP	MIAMI LAKES, FL 33014
TITLE	P
NAME	HERMAN, LAUREL
STREET ADDRESS	5979 NW 151ST ST., #120
CITY-ST-ZIP	MIAMI LAKES, FL 33014
TITLE	VP
NAME	HERMAN, GARY
STREET ADDRESS	5979 NW 151ST ST., #120
CITY-ST-ZIP	MIAMI LAKES, FL 33014
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: *Hal Herman*

4/25/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #