


2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 23, 2007 8:00 am
Secretary of State

01-23-2007 90042 012 ***150.00

DOCUMENT # 408614

1. Entity Name
KINGS BAY TRAVEL SERVICE INC.



Principal Place of Business Mailing Address

14411 S. DIXIE HWY
 SUITE 217
 MIAMI FL 33176

14411 S. DIXIE HWY
 SUITE 217
 MIAMI FL 33176



2. Principal Place of Business - No P.O. Box #
15305 S.W. 74 Ct.

3. Mailing Address
15305 S.W. 74 Ct.

Suite, Apt. #, etc.

1st MOORE CR2E034 (10/06)

City & State City & State

Palmetto Bay, Florida **Palmetto Bay, Florida**

Zip Country Zip Country

33157-2457 **USA** **33157-2457** **USA**

4. FEI Number Applied For

59-1415650 Not Applicable

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

6. Name and Address of Current Registered Agent

FRIEDMAN, TALIA
14411 S. DIXIE HWY
SUITE 217
MIAMI FL 33176

7. Name and Address of New Registered Agent

Name **Friedman, Talia**

Street Address (P.O. Box Number is Not Acceptable)

15305 S.W. 74 Ct.

City State Zip Code

Palmetto Bay, Florida **FL** **33157-2457**

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 _____ DATE _____

Signature, typed or printed name of registered agent and title (if applicable) (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

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

Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	FRIEDMAN, TALIA, P	
STREET ADDRESS	14411 S. DIXIE HWY, SUITE 217 15305 S.W. 74 Ct.,	
CITY - ST - ZIP	MIAMI FL 33176 Palmetto Bay FL 33157-2457	
TITLE	V	<input type="checkbox"/> Delete
NAME	FRIEDMAN, MOSHE, V	
STREET ADDRESS	14411 S. DIXIE HWY, SUITE 217 15305 S.W. 74 Ct.	
CITY - ST - ZIP	MIAMI FL 33176 Palmetto Bay, FL 33157-2457	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: **TALIA FRIEDMAN** 1-19-07 (305) 233-3575

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