2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002651

FILED Apr 18, 2009 Secretary of State

Entity Name: THE INTERNATIONAL TRAVELING ALL STARS, INC.

Current Principal Place of Business: New Principal Place of Business:

15411 PEPPER PINE COURT 1746 PALADINO CT LAND O LAKES, FL 34638 ODESSA, FL 33556

Current Mailing Address: New Mailing Address:

15411 PEPPER PINE COURT 1746 PALADINO CT LAND O LAKES, FL 34638 ODESSA, FL 33556

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

WALLACE, NATASHA

15411 PEPPER PINE COURT

LAND O LAKES, FL 34638 US

POWELL, NATASHA

1746 PALADINO CT

ODESSA, FL 33556 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: NATASHA POWELL 04/18/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:DCHR () DeleteTitle:DCHR (X) Change () AdditionName:WALLACE, NATASHAName:POWELL, NATASHAAddress:15411 PEPPER PINE COURTAddress:15411 PEPPER PINE COURTCity-St-Zip:LAND O LAKES, FL 34638City-St-Zip:LAND O LAKES, FL 34638

Title: VDCH () Delete Title: () Change () Addition

 Name:
 POWELL, KARI
 Name:

 Address:
 1746 PALADINO COURT
 Address:

 City-St-Zip:
 ODESSA, FL 33556
 City-St-Zip:

Title: TD () Delete Title: () Change () Addition

 Name:
 EALY, MICHAEL
 Name:

 Address:
 321 WEST 125TH STREET
 Address:

 City-St-Zip:
 NEW YORK, NY 10027
 City-St-Zip:

Title: SD () Delete Title: () Change () Addition

 Name:
 JOSHUA, ALBERT
 Name:

 Address:
 47 MCKEEVER PLACE
 Address:

 City-St-Zip:
 BROOKLYN, NY 11225
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NATASHA POWELL DCHR 04/18/2009