


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 07, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000025262	
1. Entity Name VACATION RENTALS EVERYWHERE, INC.	

Principal Place of Business 13547 VENTURA BLVD. SUITE 177 SHERMAN OAKS, CA 91423	Mailing Address 13547 VENTURA BLVD. SUITE 177 SHERMAN OAKS, CA 91423
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07122007 No Chg-P CR2E034 (11/05)

4. FEI Number 35-2200431	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent ROBBINS, JUDY 4040 GALT OCEAN DRIVE 818 FT. LAUDERDALE, FL 33308
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____ 08/07/07-80007-004 158.75
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FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PTS ROBBINS, JUDY R 4040 GALT OCEAN DRIVE, #818 FT. LAUDERDALE, FL 33308
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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: _____ <small>SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	DATE: JULY 24, 07	Daytime Phone # _____
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