2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000025112

Entity Name: KINTIGH KARE SERVICES, INC.

FILED May 18, 2007 Secretary of State

12045 SW 117 CT MIAMI, FL 33186

Current Mailing Address: New Mailing Address:

20547 OLD CUTLER RD. #212 MIAMI, FL 33189

FEI Number: 65-0656542 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KINTIGH, DAVID

10030 BAHAMA DRIVE
MIAMI, FL 33189 US

KOHSIN-KINTIGH, NANCY
10030 BAHAMA DRIVE
MIAMI, FL 33189 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: NANCY KOHSIN-KINTIGH 05/18/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition KINTIGH, DAVID DELANE KINTIGH, DAVID DELANE Name: Name: 10030 BAHAMA DR. 10030 BAHAMA DR. Address: Address: City-St-Zip: MIAMI, FL 33189 City-St-Zip: MIAMI, FL 33189

Title: VP () Delete Title: () Change () Addition

 Name:
 KINTIGH, DAVID DWIGHT
 Name:

 Address:
 255 LYNN AVE.
 Address:

 City-St-Zip:
 SATELLITE BEACH, FL 32937
 City-St-Zip:

Title: VP () Delete Title: P (X) Change () Addition

 Name:
 KOHSIN-KINTIGH, NANCY
 Name:
 KOHSIN-KINTIGH, NANCY

 Address:
 10030 BAHAMA DR.
 Address:
 10030 BAHAMA DR.

 City-St-Zip:
 MIAMI, FL 33189
 City-St-Zip:
 MIAMI, FL 33189

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NANCY KOHSIN-KINTIGH P 05/18/2007