## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **ANNUAL REPORT DOCUMENT # P99000053492** 1. Entity Name FILED Y.B.S., INC. Jul 25, 2008 08:00 AM **Secretary of State** Principal Place of Business Mailing Address 2000 ISLAND BLVD 20201 E COUNTRY CL DR 1908 2103 AVENTURA, FL 33160 AVENTURA, FL 33180 07232008 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0927835 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent **GURT, COLETTE** DO NOT WRITE 20201 E COUNTRY CL DR 2103 IN THIS SPACE AVENTURA, FL 33180 The transfer of a superior 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. 1 am familiar with, and accept the obligations of registered agent. U00000956335 SIGNATURE\_ <del>07/25/08-8000&+024</del>-150.00 Signature, typed or printed name of registered agent and title N applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE !8 \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 12, 2008 10. OFFICERS AND DIRECTORS PΠ TITLE NAME **GURT, COLETTE** STREET ADDRESS 20201 E COUNTRY CL DR #2103 CITY-ST-ZIP AVENTURA, FL 33180 VD TITLE GURT, BENJAMIN MANE STREET ADDRESS 2000 ISLAND BLVD #1908 AVENTURA, FL 33160 CITY-ST-ZIP BILE MARE **GURT, MAURICE** STREET ADDRESS 20201 E COUNTRY CL DR #2103 **DO NOT WRITE** CITY-ST-ZIP AVENTURA, FL 33180 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP RILE NAME area of the for the rate affect to that STREET ADDRESS and \$1.1 Altered, the superious princes CITY-ST-ZIP TITLE

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 supplied entail eport 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 trutted 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:

NAME STREET ADDRESS CITY-ST-ZIP