


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 03, 2008 8:00 am
Secretary of State

01-16-2008 90022 022 ***150.00

DOCUMENT # S03964			
1. Entity Name KINESIS, INC.			
Principal Place of Business 299 CAMINO GARDENS BLVD., #302 BOCA RATON, FL 33432		Mailing Address 801 SHORE DRIVE BOYNTON BEACH, FL 33435	
DO NOT WRITE IN THIS SPACE			
6. Name and Address of Current Registered Agent ABELSON, GENE -- 801 SHORE DRIVE BOYNTON BEACH, FL 33435		DO NOT WRITE IN THIS SPACE	
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 _____	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE IN THIS SPACE	
DPS ABELSON, GENE 801 SHORE DRIVE BOYNTON BEACH, FL 33435			
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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: <u><i>Gene Abelson</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>2/27/08</u> Daytime Phone # <u>954-421-3665</u>	