2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 23, 2005 8:00 am
Secretary of State
02-23-2005 90073 048 ***150.00

DOCUMENT # J42935

1. Entity Name

J & J CHILD CARE, INC.

50018153

1st MOORE CR2E034 (10/04)

Principal Place of Business	Mailing Address
822 SW 27TH ST. FT. LAUDERDALE FL 33315-2636	822 SW 27TH ST. FT. LAUDERDALE FL 33315-2636

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2740873 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

~~DE BRAGANZA, PIA~~
~~822 S.W. 27TH STREET~~
~~FT. LAUDERDALE FL 33315~~

7. Name and Address of New Registered Agent

Name: Noel De Braganza
Street Address (P.O. Box Number is Not Acceptable): 822 S.W. 27th Street
City: Fort Lauderdale FL Zip Code: 33315

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 _____ 2/17/05
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee Will Be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD DEBRAGANZA, PIA 822 SW 27TH ST. FT. LAUDERDALE FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Secretary Mercedes Jimenez 822 S.W. 27th Street Fort Lauderdale, Fl. 33315	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP DE BRAGANZA, NOEL 822 SW 27TH ST FORT LAUDERDALE FL 33315	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Noel De Braganza 822 S.W. 27th Street Fort Lauderdale, Fl. 33315	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WARREN, JOHN G 7266 BRUNSWICK CIRCLE BOYNTON BEACH FL 33427	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Helen Fernandes 1345 S.W. 30th Street Fort Lauderdale, Fl. 33315	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BURDETT-WARREN, SHEILA 7266 BRUNSWICK CIRCLE BOYNTON BEACH FL 33427	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Ross Fernandes 1345 S.W. 30th Street Fort Lauderdale, Fl. 33315	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: _____ 2/17/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #