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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT #

(8)

STAR BRIGHT CHILD DEVELOPMENT CENTER INC.

FILED May 13 1998 8:00am Secretary of State



| Principal Place of Business Mailing Address | | | | | | - S SOURCION AND ONLINE COLOR OF SECTION OF | r asak álali alá | II BANII INNI |
|---|--------------------------------|--|---|-----------------|-----------------|--|------------------|---------------|
| 1253 NE 112TH ST MIAMI FL 33161 | | 1253 NE 112TH ST Miami FL 33161 | | | | | | |
| j | | | | | | DO NOT WRITE IN THIS | SPACE | |
| • | | | | | | 3. Date Incorporated or Qualified | | |
| A D · · · · · · · · · · · · · · · · · · · | | | | | | 08/14/1989 | | |
| | Place of Business | 2a. Mailing Address | - h | | | 4. FEI Number | | oplied For |
| 21 Cuito Ant | # ata | 26] | | | | 65-0143192 | | ot Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | 27 | | | 5. Certificate of Status Desired Security Securi | | |
| City & Stat | te | City & State | City & State | | | 6. Election Campaign Financing | \$5.00 | May Be |
| 23 | | 28 | ··· • · · · · · · · · · · · · · · · · · | | | Trust Fund Contribution | Added | to Fees |
| Zip | Country | Z _i p | Country | | | 8. This corporation owes or has paid the cu | | |
| 24 | 25] | 29 | 30 | | | | | No |
| ļ | | Current Registered Agent | | 81 1 | Name | 10. Name and Address of New Registered | Agent | |
| | vrtin, Ivan B. | | | *' ' | MELLIA | | | ŀ |
| | 060 SW 106 ST. AMI FL 33186 | | 82 Street Add | | | ress (P.O. Box Number is Not Acceptable) | | |
| 1,,,, | | | | 83 | | | | |
| | | | Ì | 84 (| City | FL | 85 Zip | Code |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | | | | | | | | |
| SIGNATURE | | | | | | | | |
| Signature, typed or printed name of registered agent and title it applicable (NOTE: Regis | | | | i Agent t | signature requi | red when reinstating) DATE | | |
| 12. | | RS AND DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFFICERS AN | | |
| TITLE | D | ☐ DELETE | 1.1 TIT | | | | Change | Addition |
| NAME | MARTIN, LUISA | | 1.2 NA | | | | | ; |
| STREET ADDRESS | 13060 SW 106 ST. | | | REET AD | | | | Į. |
| CFTY-ST-ZWP | MIAMI FL | The same | | TY-ST-Z | ZIP | | | |
| MIE | D | ☐ DELETE | 2.1 TIT | | İ | | ☐ Change | Addition |
| NAME | MARTIN, IVAN B. | | 2.2 NA | | 1 | | | |
| STREET ADDRESS | 13060 SW 106 ST. | | | REET AD | ı | | | |
| CITY-ST-ZIP | MIAMI FL | | | TY-ST- | ZIP | · · · · · · · · · · · · · · · · · · · | | |
| TITLE | D | DELETE | 3.1 TIY | | ļ | | Change | ☐ Addition |
| NAME | MARTIN, MICHAEL | | 3.2 NA | | 1 | | | ŀ |
| STREET ADDRESS | 6185 LAKEVILLE RD | | | REET ADI | | | | ľ |
| CITY-ST-ZIP | ORLANDO FL | directoral half-difficulties direction and the second seco | | TY-ST-2 | ZIP | | | |
| TITLE | | DELETE | 4.1 117 | | | | Change | Addition |
| NAME | | | 4. 2 NA | | | | | 1 |
| STREET ADDRESS | | | 4.3 ST | 4.3 STREET ADI | | | | |
| CITY-ST-ZIP | | | | 4.4 CITY-ST-ZIP | | | · | |
| TITLE | | ☐ DELETE | 5.1 TIT | | | | Change | Addition |
| NAME | | | | 5.2 NAME | | | | |
| STREET ADDRESS | | | 5.3 STF | 5.3 STREET ADDI | | | | ļ |
| CITY-ST-ZIP | | | | Y-\$1-Z | nP . | | | |
| TITLE | | DELETE | 6.1 TIT | 6.1 TITLE | | | Change | Addition |
| NAME | | | 6.2 NA | 6.2 NAME | | • | | - |
| STREET ADDRESS | | | 6.3 STF | REET ADI | DRESS | | | i |
| CITY-ST-ZIP | | | 6.4 CIT | Y-ST-Z | IP I | | | |

14. Thereby 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 annual report or supplemental annual 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed for on an attachment with an address.

TVAN B. MARTIN

SIGNATURE:

305 388 0648