

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P0000Q009633

1. Entity Name

Kidsworks Pre-K Academy, Inc.

**FILED**  
**May 14, 2002 8:00 am**  
**Secretary of State**

05-14-2002 90348 034 \*\*\*150.00

2. Principal Place of Business

1127 48th Street

West Palm Beach, FL

33407-2301

3. Mailing Address

1127 48th Street

West Palm Beach, FL

33407-2301

2. Principal Place of Business

3. Mailing Address

3452 W. BOYN. BCH BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

10

City & State

City & State

BOYNTON BEACH, FL

Zip

Country

Zip

33436

Country

4. FEI Number

65-0974980

Adopted For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Andrews, Cedric

1127 48th Street

West Palm Beach, FL 33407-2301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

3. 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

Signature (Typed or printed name of registered agent and the corporation)

(NOTE: Registered Agent signature required when re-registering)

DATE

4. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**

**After MAY 1, 2002 Fee will be \$550.00**

**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDIT'G/CHANGES TO OFFICERS AND DIRECTORS (If any)

TITLE: Dir.  
NAME: Andrews, Cedric  
STREET ADDRESS: 1127 48th Street  
CITY-STATE-ZIP: West Palm Beach, FL 33407-2301

TITLE: DIR. PRES  
NAME: ANDREWS, CEDRIC  
STREET ADDRESS: 1077 ASPRI WAY  
CITY-STATE-ZIP: PALM BEACH Gdns, FL 33418

TITLE: Dir.  
NAME: Andrews, Carla  
STREET ADDRESS: 1127 48th Street  
CITY-STATE-ZIP: West Palm Beach, FL 33407-2301

TITLE: DIR. TREAS.  
NAME: ANDREWS, CARLA  
STREET ADDRESS: 1077 ASPRI WAY  
CITY-STATE-ZIP: PALM BEACH Gdns, FL 33418

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STREET ADDRESS:   
CITY-STATE-ZIP:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 113.07(9)(b), 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 original signatory 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 11 or 12 of this report, changed, or on an attachment with an address, with all other file empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-02