


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2004 08:00 AM
Secretary of State

DOCUMENT # P96000027633
1. Entity Name
BAMBI LAND DAY CARE CENTER, INC.



Principal Place of Business 4755 W 8 AVE HIALEAH, FL 33012	Mailing Address 4755 W 8 AVE HIALEAH, FL 33012
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DO NOT WRITE IN THIS SPACE



03092004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0662929	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**CUZA, ALINA
4755 W 8 AVE
HIALEAH, FL 33012**

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CUZA, ALINA 5865 W 14 LANE HIALEAH, FL 33012
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CUZA, OSMEL 5865 W 14 LANE HIALEAH, FL 33012
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04/26/04-80135-002 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Alina Cuza 4-22-04 (305)826-4020
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #