FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000041263 (0)

SMALL KIDZ WHEELS INC.

Principal Place of Business

Mailing Address

FILED Apr 17 1998 8:00am Secretary of State



This partice of positions				maining / taciroso					
10400 NW 25TH AVE Miami FL 33147				10400 NW 25TH AVE MIAMI FL 33147					
								DO NOT WRITE IN THIS SPACE	
								3. Date Incorporated or Qualified	
								05/14/1996	
2. Principal P	lace of Busin	ness	28.	26. Mailing Address				4. FEI Number Applied For	
21				26				65-0674689 Not Applicable	
Suite, Apt. #. etc.				Suite, Apt. #, etc.				\$2.75 Additional	
22				27				5. Certificate of Status Desired Fee Required	
City & State				City & State					
23			20	28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	 				Count	rv.			
24		25	29		30	,		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
<u> </u>	9. Name	and Address of		tered Agent	190	_		10. Name and Address of New Registered Agent	
14			-		8	1	Name	10. Name and Address of their flogratered Agent	
	CKSON, IR						140.110		
10400 NW 25TH AVE				Ī			2 Street Address (P.O. Box Number is Not Acceptable)		
MIAMI FL 33147									
					83	3			
					84	4	City	■■ 85 Zip Code	
							-		
11. Pursuant	to the provis	ons of Sections 6	07.0502 and 6	07.1508, Florida Stati	utes, the abov	ve-i	named c	corporation submits this statement for the purpose of changing its registered	
agent i a	ıegistered ag ım familiar wi	ent, or both, in the th, and accept the	u State of Florid o obligations of	da. Such change was I. Section 607.0505. F	s authorized b Florida Statute	oy t əs.	ine corpo	oration's board of directors. I hereby accept the appointment as registered	
SIGNATURE			•						
SIGNATURE	Signature, lyped	or printed name of regis	tered agent and little	Fapolicable (NC	OTE . Registered Ag	geni	n arulangia l	required when reinstating) DATE	
12.		OFFICE	RS AND DIREC	CTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D			DELETE	11 TITLE		1	Change Addition	
NAME	JACKSO	ON, IREAL			1.2 NAME		- 1	, –	
STREET ADDRESS		W 25TH AVE		ē	1.3 STREE		DDBEES	·	
CITY-ST-ZIP	MIAMI F				1		1		
				DELETE	1.4 CITY- 2.1 TITLE		ZIP -	Change Addition	
NAME	Jack	LYVY!	HERL	→				C Change C Admindi	
PROVINC	17112	SOU I MLFL	2010		2.2 NAME		1		
STREET ADDRESS	iano		ر دروی	`	2.3 STREE	TAL	DDRESS		
CITY-ST-ZIP	WIH	Wrkr	عارد	<u> </u>	2. 4 CHY-	ST-	- ZIP		
11111				L_ DELETE	3.1 TITLE			Change Addition	
NAME					3.2 NAME				
STREET ADDRESS					3.3 STREE	T AE	DDRESS		
CITY-ST-ZIP	ST-ZIP				3.4. CITY-\$1-ZIP		- ZIP		
TITLE				DELET E	4.1 TITLE			Change Addition	
NAME					4. 2 NAME		ļ	700002492127 Addition -04/17/3801046029	
STREET ADDRESS					4.3 STREE	TAE	DORESS	-U4/17/33U1U46U23	
CITY-ST-ZIP					4.4 CITY-			***150.00	
TITLE	_			DELETE	5.1 TITLE			Change Addition	
NAME					5.2 NAME			Crowled Maditori	
STREET ADDRESS							DD0EGG	· ·	
	4				5.3 STREE		- 1	_	
CITY-ST-ZIP TITLE				☐ DELETE	5.4 CRY-1	SI - I	ZIP		
i i				☐ DETEIE	6.1 TITLE			Ghanga W Addition	
NAME					6.2 NAME			4 'M//	
STREET ADDRESS					6.3 STREE	T AD)DRESS	, VV	
CITY-ST-ZIP					6.4 CRY-	st-1	ZIP		

14. 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 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 or 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, or on an attachment with an address.