2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# N02000001472

Entity Name: SUMMER FUN FOR KIDS, INC.

Current Principal Place of Business:

2900 MIDDLE STREET
300
MIAMI, FL 33133 US

New Principal Place of Business:

Current Mailing Address:

C/O WHITE & CASE LLP
200 S. BISCAYNE BLVD., SUITE 4900
MIAMI, FL 33131

New Mailing Address:

FEI Number: 02-0556989 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FERNANDEZ, MARLENE A
C/O WHITE & CASE LLP
200 S. BISCAYNE BLVD., SUITE 4900
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	GERSTEIN, NORMAN	
Address:	73 WEST FLAGLER STREET	
City-St-Zip:	MIAMI, FL 33130	
Title:	D	( ) Delete
Name:	REYES, ISRAEL	
Address:	1351 NW 12TH STREET	
City-St-Zip:	MIAMI, FL 33125 US	
Title:	D	( ) Delete
Name:	GERSTEIN, JACKIE	
Address:	800 NW 15TH STREET	
City-St-Zip:	MIAMI, FL 33156	
Title:	D	( ) Delete
Name:	ROBERTS, CLAY	
Address:	2900 MIDDLE STREET, SUITE 700	
City-St-Zip:	MIAMI, FL 33133	
Title:	D	( ) Delete
Name:	KAPLAN, KEVIN	
Address:	2699 SOUTH BAYSHORE DRIVE, SUITE PH	
City-St-Zip:	MIAMI, FL 33130	
Title:	D	( ) Delete
Name:	FRANK, GONZALEZ	
Address:	1485 SEMORAN BLVD SUITE 1448	
City-St-Zip:	WINTER PARK, FL 32792	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	GONZALEZ, JACKIE	
Address:	800 NW 15TH STREET	
City-St-Zip:	MIAMI, FL 33156	
Title:	D	(X) Change ( ) Addition
Name:	ROBERTS, CLAY	
Address:	121 ALHAMBRA PLAZA	
City-St-Zip:	CORAL GABLES, FL 33134	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NORMAN GERSTEIN PRES 04/29/2008

Electronic Signature of Signing Officer or Director — Date