

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000002597

Entity Name: MIAMI HEALTHY KIDS INC.

Current Principal Place of Business:

10700 CARIBBEAN BLVD SUIT #215
CUTLER BAY, FL 33189

Current Mailing Address:

P O BOX 900797
HOMESTEAD, FL 33090

FEI Number: 45-0625959

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEE, DEMARIO C
113 NE 12TH AVE
HOMESTEAD, FL 33030 US

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

Officer/Director Detail :

Title P
Name LEE, DEMARIO C
Address 113 NE 12TH AVE
City-State-Zip: HOMESTEAD FL 33030

Title DIRECTOR
Name LEE, CHARTANEK M
Address 197 SW 7TH ST #304
City-State-Zip: HOMESTEAD FL 33030

Title BM
Name LEE, DECHRISSY
Address 834 SW 1ST ST
City-State-Zip: FLORIDA CITY FL 33034

Title BM
Name LEE, DILLIN
Address 834 SW 1ST ST
City-State-Zip: FLORIDA CITY FL 33034

Title BM
Name TENNER, DEUNTA
Address 834 SW 1ST ST
City-State-Zip: FLORIDA CITY FL 33034

I hereby 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 all other like empowered.

SIGNATURE: DEMARIO LEE

PRESIDENT

02/26/2014

Electronic Signature of Signing Officer/Director Detail

Date