2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
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Secretary of State
CC6475987381

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Entity Name: KIDCO CHILD CARE INC.

Current Principal Place of Business:

2720 WEST 1ST AVE.
HIALEAH, FL 33010

Current Mailing Address:

2720 WEST 1ST AVE.
HIALEAH, FL 33010 US

FEI Number: 65-0257588

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LA VILLA, SILVIA
1013 NW 106 AV CR
MIAMI, FL 33172 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	VELAZQUEZ-MARTINEZ, NILSA
Address	12071 SW 126 TR
City-State-Zip:	MIAMI FL 33186

Title	CHAIRMAN
Name	CHISHOLM, ESTHER
Address	220 NW 47 ST FRONT
City-State-Zip:	MIAMI FL 33137

Title	VC
Name	MENARD, JEAN-ROBERT
Address	880 NE 207 TERR #202
City-State-Zip:	NORTH MIAMI BEACH FL 33179

Title	TREASURER
Name	OVIES, IDA
Address	3785 NW 82 AVE SUITE 302
City-State-Zip:	DORAL FL 33166

Title	SECRETARY
Name	LIEDERMAN, KAREN
Address	5660 COLLINS AV #21D
City-State-Zip:	MIAMI BEACH FL 33140

Title	DIRECTOR
Name	MONUMA, FABIENNE
Address	5800 BEACH BLVD SUITE 203-164
City-State-Zip:	JACKSONVILLE FL 32207

Title	DIRECTOR
Name	SOLIS, JANETTE
Address	14424 SW 20TH ST
City-State-Zip:	MIAMI FL 33175

Title	DIRECTOR
Name	SMITH, NORA
Address	901 SW 138 AVE #409C
City-State-Zip:	PEMBROKE PINES FL 33027

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: NILSA VELAZQUEZ-MARTINEZ PRESIDENT/CEO 03/08/2016

Electronic Signature of Signing Officer/Director Detail — Date