2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000033508

Entity Name: SUNNY ISLES DAYCARE CORP.

Current Principal Place of Business:

17395 NORTH BAY RD 102 SUNNY ISLES BEACH, FL 33160

Current Mailing Address:

17395 NORTH BAY RD 102 SUNNY ISLES BEACH, FL 33160

FEI Number: 99-0365087

Name and Address of Current Registered Agent:

RIVAS, WENDY M 17395 NORTH BAY RD 102 SUNNY ISLES BEACH, FL 33160 US Mar 05, 2018 Secretary of State CC8902776055

FILED

Certificate of Status Desired: No

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

| | 5 5 5 | | |
|---------------------------|----------------------------|-----------------|----------------------------|
| Officer/Director Detail : | | | |
| Title | PRESIDENT | Title | VP |
| Name | RIVAS, WENDY M | Name | DANNIKOVA, ELENA |
| Address | 17395 NORTH BAY ROAD | Address | 17395 NORTH BAY RD |
| City-State-Zip: | SUNNY ISLES BEACH FL 33160 | 102 | |
| | | City-State-Zip: | SUNNY ISLES BEACH FL 33160 |
| Title | D | | |
| Name | RIVAS, WENDY M | | |
| Address | 17395 NORTH BAY RD 102 | | |
| City-State-Zip: | SUNNY ISLES BEACH FL 33160 | | |

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WENDY RIVAS

PRESIDENT

03/05/2018

Date

Electronic Signature of Signing Officer/Director Detail