

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000038262

**Entity Name:** KIDS CORNER, LLC**Current Principal Place of Business:**3275 NW 84 AVENUE  
MIAMI, FL 33122**Current Mailing Address:**3275 NW 84 AVENUE  
MIAMI, FL 33122**FEI Number:** 20-0929097**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**TRILLES, JORGE  
7701 S.W. 78 STREET  
MIAMI, FL 33143 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

**Authorized Person(s) Detail :**

Title MGRM  
Name CABRERA, JUAN  
Address 7765 SW 75 AVE  
City-State-Zip: MIAMI FL 33143

Title MGRM  
Name CABRERA, VICTORIA  
Address 7765 SW 75 AVE  
City-State-Zip: MIAMI FL 33143

Title MGRM  
Name TRILLES, JORGE  
Address 7701 SW 78 ST  
City-State-Zip: MIAMI FL 33143

Title MGRM  
Name TRILLES, CLAUDIA  
Address 7701 SW 78 ST  
City-State-Zip: MIAMI FL 33143

Title MGRM  
Name CRUZ, VICTOR V  
Address 15103 TATENSHALL TRAIL  
City-State-Zip: SOUTHWEST RANCHES FL 33331

Title MGRM  
Name CRUZ, LOURDES  
Address 15103 TATENSHALL TRAIL  
City-State-Zip: SOUTHWEST RANCHES FL 33331

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CLAUDIA TRILLES

MGRM

04/06/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date