

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 412978

FILED
Feb 02, 2009
Secretary of State

Entity Name: SKIPPER CHUCK'S CHILD CARE CENTER, INC. #2

Current Principal Place of Business:

#2
17800 N.W. 22 AVE.
MIAMI, FL

New Principal Place of Business:

3601 NW 194 STREET
MIAMI, FL 33054

Current Mailing Address:

2130 HOLLYWOOD BLVD
HOLLYWOOD, FL 33020 US

New Mailing Address:

FEI Number: 59-1358354 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RABEN, JUNE
5660 COLLINS AVE 21 B
MIAMI BCH, FL 33140 US

Name and Address of New Registered Agent:

RICHARD RABEN
2130 HOLLYWOOD BLVD
HOLLYWOOD, FL 33020 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: RICHARD RABEN

02/02/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: FOSTER, A.,
Address: 770 NW 179TH ST.
City-St-Zip: MIAMI, FL

Title: P () Delete
Name: RABEN, JUNE,
Address: 5660 COLLINS AVENUE 21 B
City-St-Zip: MIAMI BEACH, FL 33140

Title: VD () Delete
Name: RABEN, M.,
Address: 5660 COLLINS AVENUE
City-St-Zip: MIAMI BEACH, FL 33140

Title: T () Delete
Name: RABEN, RICHARD
Address: 2130 HOLLYWOOD BLVD
City-St-Zip: HOLLYWOOD, FL 33020

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

SIGNATURE: RICHARD RABEN

TR.

02/02/2009

Electronic Signature of Signing Officer or Director

Date