

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -8 AM 8:41

DOCUMENT # 467691 (2)

1. Corporation Name

SUNNY DAY NURSERY SCHOOL INC.

Principal Place of Business

3265 NW 14TH TERRACE
MIAMI FLORIDA 33125

Mailing Address

3265 NW 14TH TERRACE
MIAMI FLORIDA 33125

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/17/1975

3a. Date of Last Report

02/01/1994

4. FEI Number

59-1621738

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SANCHEZ-CIFUENTES, ZOILA
3265 NW 14TH TERRACE
MIAMI FL 33125

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Zoila Sanchez-Cifuentes

(Signature, typed or printed name of registered agent and, if applicable, (NOTE: Registered Agent signature required when translating)

02-08-95

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP
NAME SANCHEZ-CIFUENTES, ZOILA
STREET ADDRESS 1433 N W 33RD CT
CITY-ST-ZIP MIAMI, FLORIDA 00000

1.1 TITLE ☐ Change ☐ Addition

TITLE SD
NAME SANCHEZ-CIFUENTES, ZOILA
STREET ADDRESS 1433 N W 33RD CT
CITY-ST-ZIP MIAMI, FLORIDA 00000

1.2 NAME ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.2 NAME ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP

2.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP

2.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.2 NAME ☐ Change ☐ Addition

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CITY-ST-ZIP

3.4 CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

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4.2 NAME ☐ Change ☐ Addition

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4.3 STREET ADDRESS ☐ Change ☐ Addition

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4.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE
NAME
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5.2 NAME ☐ Change ☐ Addition

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5.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP

5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.2 NAME ☐ Change ☐ Addition

TITLE
NAME
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CITY-ST-ZIP

6.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP

6.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE:

Zoila Sanchez-Cifuentes (D.P.)

02-08-95

(305) 634-3602