

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED  
May 05 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 662122 (1)

1. Corporation Name  
MIAMI CHILD'S WORLD, INC.



Principal Place of Business

975 ARTHUR GODFREY RD #401  
MIAMI BCH FL 33140

Mailing Address

17121 COLLINS AVE  
MIAMI BEACH FL 33160-3617  
US

3. Date Incorporated or Qualified  
04/24/1980

3a. Date of Last Report  
02/02/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number

59-2212583

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

GILLER, BRIAN J.  
975 ARTHUR GODFREY RD #301  
MIAMI BEACH FL 33140

10. Name and Address of New Registered Agent

11 Name  
GERALD F. Richman, Esq.  
12 Street Address (P.O. Box Number is Not Acceptable)  
Richman GREER Weil Brumbaugh, et al.  
13 201 South Biscayne Blvd. 10th floor  
14 City  
Miami  
15 State  
FL  
16 Zip Code  
33131

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE  
PTD  
NAME  
GUARINO, FRANK J.  
STREET ADDRESS  
17121 COLLINS AVE.  
CITY - ST - ZIP  
MIAMI BCH. FL 33160

☐ DELETE

TITLE  
VSD  
NAME  
GILLER, IRA D.  
STREET ADDRESS  
975 ARTHUR GODFREY RD.  
CITY - ST - ZIP  
MIAMI BCH. FL 33140

☒ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

TITLE  
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STREET ADDRESS  
CITY - ST - ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP

☐ Change

☐ Addition

1.1 TITLE  
VSD  
1.2 NAME  
Guarino, MARGARET  
1.3 STREET ADDRESS  
17121 Collins AVE  
1.4 CITY - ST - ZIP  
Miami Beach, FLA. 33160

☒ Change

☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP

☐ Change

☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP

☐ Change

☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP

☐ Change

☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

☐ Change

☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Frank J. Guarino Pres. & Treas. 4/8/97

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)