

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# J42935

Entity Name: J & J CHILD CARE, INC.

FILED
Aug 17, 2006
Secretary of State

Current Principal Place of Business:

822 SW 27TH ST.
FT. LAUDERDALE, FL 333152636

New Principal Place of Business:

Current Mailing Address:

822 SW 27TH ST.
FT. LAUDERDALE, FL 333152636

New Mailing Address:

FEI Number: 59-2740873

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE BRAGANZA, NOEL
822 S.W. 27TH STREET
FT. LAUDERDALE, FL 33315 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D/S (X) Delete
Name: JIMENEZ, MERCEDES
Address: 822 SW 27TH ST.
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: P () Delete
Name: DE BRAGANZA, NOEL
Address: 822 SW 27TH ST
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: VP () Delete
Name: FERNANDES, HELEN
Address: 1345 SW 30TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: T () Delete
Name: FERNANDES, ROSS
Address: 1345 SW 30TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33315

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D/P (X) Change () Addition
Name: DE BRAGANZA, NOEL
Address: 822 SW 27TH ST
City-St-Zip: FORT LAUDERDALE, FL 33315

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 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: NOEL DEBRAGANZA

P

08/17/2006

Electronic Signature of Signing Officer or Director

Date