FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED AND FILED

95 MAY -1 PM 2:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J85102 (8)

1. Corporate Name

SUNRISE PRE-SCHOOL FOR EARLY LEARNING, INC.

Principal Office Address
10069 SUNSET STRIP
SUNRISE FL 33322-5303

Mailing Address
10069 SUNSET STRIP
SUNRISE FL 33322-5303

LEAVE BLANK IN THIS SPACE

3. Date Incorporated / Qualified: 07/30/1987

3a. Date of Last Report: 04/29/1994

2. Principal Office Address
21
22
23
24 25

2a. Mailing Address
26
State Apt. # or Rm.
27
City & State
28
29 30

4. FEI Number: 59-2849455 — 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. Has corporation applied for exemption under s. 196.199, Florida Statutes? ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

MULLINGS, SANFORD A.
10069 SUNSET STRIP
SUNRISE FL 33322

10. Name and Address of New Registered Agent

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 607.0501 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 hereby accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE D
NAME FERNANDEZ, JUDITH L.
ADDRESS 10069 SUNSET STRIP
CITY SUNRISE FL

TITLE D
NAME PITTER, MARJORIE H.
ADDRESS 10069 SUNSET STRIP
CITY SUNRISE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is validly furnished and does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. 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 the report as required by Chapter 607, Florida Statutes; and that my name appears above, or on attached amendment, or no amendment is attached.

SIGNATURE: Marjorie Pitter
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 28/95 (305) 741-3797
Date Daytime Phone

0230692 CP