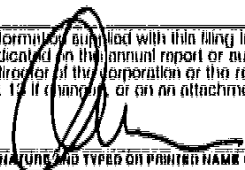


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995		 FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # J91220 (0)		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 95 APR -7 AM 11:17	
1. Corporation Name KIDZCO INC. OF PALM BEACH		DO NOT WRITE IN THIS SPACE.	
Principal Place of Business 8951 STIRLING RD. COOPER CITY FL 33326		Mailing Address 8951 STIRLING RD. COOPER CITY FL 33326	
2. Principal Place of Business		3a. Date of Last Report 07/28/1994	
21. Suite, Apt. #, etc.		3. Date Incorporated or Qualified 09/02/1987	
22. City & State		4. FEI Number 65-0008835	
23. Zip		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
24. Country		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
25. Country		7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	
26. Country		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	
27. Country		9. Name and Address of Current Registered Agent	
28. Country		10. Name and Address of New Registered Agent	
29. Country		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.	
30. Country		12. OFFICERS AND DIRECTORS	
31. Country		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
32. Country		14. I do hereby certify that the information furnished with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on the 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 687, Florida Statutes; and that my name appears in Block 12 or Block 13. If changed, or on an attachment with an address.	
33. Country		SIGNATURE:  ARTHUR CARUANA 4/13/95 505-781-5555	
34. Country		DATE: 4/13/95	
35. Country		15. SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	
36. Country		16. SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	
37. Country		17. SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	
38. Country		18. SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	
39. Country		19. SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	
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