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CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K29586

(0)

LOVING CHILD'S CARE CORP.

FILED Apr 29 1998 8:00am Secretary of State



| Principal Place of Business Mailing Address | | | | | |) I I I I I I I I I I I I I I I I I I I | | EF MINIT INCL |
|---|---|-------------------------|--------------------|----------------------------------|--|---|--------------------|---------------|
| | OATH STREET 🥤 | 14651 S.W. 104TH STREET | | | | | | |
| MIAMI FL 33 | 186 | MIAMI FL 33186 | | | DO NOT WRITE IN THIS SPACE | | | |
| US | | U\$ | | | | 3. Date Incorporated or Qualified | 0011102 | |
| | | | | | | 07/27/1988 | | |
| 2. Principal F | Place of Business | 2a. Mailing Address | | | | 4. FEI Number | IA I | pplied For |
| 21 | | 26 | | | 65-0131756 | No. | ot Applicable | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | | Additional | | |
| 22 | | 27 | | | G. Contribute of Glades Desired | Fee Re | equired | |
| City & State | | City & State | | 6. Election Campaign Financing | | May Be | | |
| 23 | | 28 County | | | Trust Fund Contribution | | to Fees | |
| Zip | Country | Zip Country | | | 8. This corporation owes or has paid the o | | tangible 7 No | |
| 24 | 25 29 30 30 9, Name and Address of Current Registered Agent | | | | | Personal Property Tax due June 30. 10. Name and Address of New Registere | | |
| DE | LA TORRE, SILVIA M | | 18 | 31 | Name | | - 71 g 0310 | ··- |
| | 712 SW 138 PLACE | | | _ | | | | |
| | 712 BW 130 PLACE AMI FL 33186 | | ١ | 32 | Street Addres | ddress (P.O. Box Number is Not Acceptable) | | |
| i inin | July LC 22 100 | | Ε | 33 | | | | |
| | | | 8 | 34 | City | ···· | . 85 Zip | Code |
| 44 Duning to the mission of Continue CO7 0000 and CO7 1500 Elando District | | | | | | F | | |
| 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 | | | | | | | | |
| BIGHATORE | Signature typod or printed name of registered age | | E Registered / | Agent | t signature required | d when reinstating) DATE | | |
| 12. | OFFICERS AN | | 13. | | | ADDITIONS/CHANGES TO OFFICERS A | | |
| TITLE | VSD | | | 1.1 TITLE | | | Change | Addition |
| NAME | DE LA TORRE, SILVIA M. | | 1.2 NAME | | | | | |
| STREET ADDRESS | 10712 S.W. 138 PLACE | | 1.3 STREET ADDRESS | | i | | | |
| CITY-ST-ZIP TITLE | MIAMI FL | PD DELETE | | 1.4 CITY - ST - ZIP 2.1 T(TLE | | | Change | Addition |
| NAME | RODRIGUEZ, SANDRA C | בן הנכנונ | 2.2 NAME | | | | Change | Addition |
| STREET ADDRESS | 9940 SW 146 COURT | | 2.3 STREET ADDRESS | | UNDDECC | | | |
| CITY-ST-ZIP | MIAMI FL | | 2. 4 CITY-ST-ZIP | | - 1 | | | |
| TITLE | Marani I C | ☐ DELET E | 3.1 TITLE | | -211 | | Change | Addition |
| NAME | | | 3.2 NAME | | | | · •- | |
| STREET ADDRESS | is . | | | 3.3 STREET ADDRESS | | | | |
| CITY-ST-ZIP | · | | | 3.4. CITY-ST-ZIP | | | | |
| TITLE | | | 4.1 7111 | | | | Change | Addition |
| NAME | | | 4. 2 NAM | VE: | | | | |
| STREET ADDRESS | | | 4.3 STR | EE? A | ADDRESS | | | |
| CITY-ST-ZIP | <u> </u> | | 4.4 CITY | '-ST- | - ZIP | | | |
| TITLE | | DELETE | 5.1 TITU | F | | | Change | Addition |
| NAME | | | 5.2 NAM | ME. | | | | |
| STREET ADDRESS | | | 5.3 STR | EET A | ADDRESS | | | |
| CITY-ST-ZIP | | | 5.4 CITY | '- ST- | - ZIP | | | |
| TITLE | | ☐ DEL ete | ETE 6.1 TITLE | | | | Change | Addition |
| NAME | | | 6.2 NAM | lΕ | | | | |
| STREET ADDRESS | | | 6.3 STR | EET A | ADDRESS | | | |
| CITY-ST-ZIP | L | | 6.4 CITY | -SI- | - ZIP | | | |

I 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 suppliemental 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 adaction with an address.