

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K87344

FILED
Apr 27, 2009
Secretary of State

Entity Name: BUTTONS & BOWS PROFESSIONAL DAYCARE, INC.

Current Principal Place of Business:

5650 STIRLING RD, STES 12, 13, 14
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

5650 STIRLING RD, STES 12, 13, 14
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 65-0131894

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANDY, KAREN L
20422 SW 52 MANOR
PEMBROKE PINES, FL 33332 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: MANDY, KAREN BROSIUS
Address: 20422 SW 52 MANOR
City-St-Zip: PEMBROKE PINES, FL 33332 US

Title: VSD () Delete
Name: BROSIUS, MARION L.
Address: 4100 N. 58TH AVE., APT. 308
City-St-Zip: HOLLYWOOD, FL 33021 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: KAREN MANDY

PTD

04/27/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date