

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000036383

FILED
Apr 14, 2004
Secretary of State

Entity Name: KIDSCITY COMPANY, L.L.C.

Current Principal Place of Business:

1893 S.W. 149TH AVENUE
MIRAMAR, FL 33027 US

New Principal Place of Business:

Current Mailing Address:

1893 S.W. 149TH AVENUE
MIRAMAR, FL 33027 US

New Mailing Address:

FEI Number: 05-0588339

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOS SANTOS, FERNANDO J
1893 S.W. 149TH AVENUE
MIRAMAR, FL 33027 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

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: GUZMAN, JULIE
Address: CALLE CHACAO EDIF. INDIALCA I, PISO 5 # 5D
City-St-Zip: MACARACUAY, CARACAS, DF 1050 VE

Title: MGRM () Delete
Name: TREJO, EMILIO
Address: CALLE CHACAO EDIF. INDIALCA I, PISO 5 # 5D
City-St-Zip: MACARACUAY, CARACAS, DF 1050 VE

Title: MGRM () Delete
Name: MATA, ALBERTO A
Address: CALLE CHACAO EDIF. INDIALCA I, PISO 5 # 5D
City-St-Zip: MACARACUAY, CARACAS, DF 1050 VE

ADDITIONS/CHANGES:

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

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 Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ALBERTO MATA

MGRM

04/14/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date