

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# L36156

**FILED**  
**Dec 23, 2010**  
**Secretary of State**

**Entity Name:** GIRTMAN CHILD CARE CENTER, INC.

**Current Principal Place of Business:**

101 NE 5TH AVE.  
BOYNTON BEACH, FL 33435

**New Principal Place of Business:**

**Current Mailing Address:**

C/O BLANCHE H. GIRTMAN  
P.O. BOX 243  
BOYNTON BEACH, FL 334250243 US

**New Mailing Address:**

**FEI Number:** 65-0174321

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GIRTMAN, BLANCHE H  
912 NW 3RD STREET  
BOYNTON BEACH, FL 33435 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:** BLANCHE H GIRTMAN

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** T  
**Name:** GIRTMAN-GAYLE, CLAIRE TREAS.  
**Address:** 1315 WEST INDIES WAY  
**City-St-Zip:** LANTANA, FL 33462 US

**Title:** P  
**Name:** GIRTMAN, BLANCHE H PRES  
**Address:** 912 NORTH WEST 3RD STREET  
**City-St-Zip:** BOYNTON BEACH, FL 33435 US

**Title:** S  
**Name:** GIRTMAN, ANGELA D SEC  
**Address:** 1920 NORTHEAST FIRST LANE  
**City-St-Zip:** BOYNTON BEACH, FL 33435

I hereby 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 all other like empowered.

**SIGNATURE:** CLAIRE GIRTMAN-GAYLE

TREA

12/23/2010

Electronic Signature of Signing Officer or Director

Date