FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90019 015 ***158.75

DOCUMENT # L52083

1. Corporation Name

KIDS:KAROUSEL, INC. OF CENTRAL FLORIDA

是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个				
Principal Plac	e of Business	Mailing Address		(1981/21) 28: 21/12 (1917 29) 21/21 (Bigs (II) Bigh erzu gigh erzu gigh erzu gigh erzu gigh
1527 DODD RD	ı i	1527 DODD RD		1
WINTER PARK FL 32792-3669		WINTER PARK FL 32792-3669		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualifed
		,		02/15/1990
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		95-3013139 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		\$8.75 Additional
		27		5. Certificate of Status Desired Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip Country		Zip	Country	8. This corporation owes the current year Intangible Personal Property Tax.
24	25	29 3	<u>o </u>	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name				
CHARLOTTE ROBERTS] -]	
1521 DODD RD			82 Street Addre	ress (P.O. Box Number is Not Acceptable) 1
WINTER PARK FL 32792			83	4 Y . 1. 3/15 EV
			84 City	85 Zip Code
				oration 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 accent the obligations of, Section 607.0505, Florida Statutes. SIGNATURE: Signature, lyber or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE				
12.	· OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1,1 TITLE	☐ Change ☐ Addition
NAME	ROBERTS, CHARLOTTE A		1.2 NAME	J - 10 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
STREET ADDRESS	1521 DODD RD		1.3 STREET ADDRESS) 15 T F3F
CITY-ST-ZIP	WINTER PARK FL 32792-3669		1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE	VP/	☐ DELETE	2.1 TITLE	Claride Nadigoti
NAME	ROBERS, GREGORY A.		2.2 NAME	1 The Water State
STREET ADDRESS	1511 DODD RD		2.3 STREET ADDRESS	1、原理化 化基件
CITY-ST-ZIP	WINTER PARK FL 32792-3669	☐ DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE	Change Addition
TITLE	ST NICHELLE M	☐ OELETE	· · · · · · · · · · · · · · · · · · ·	Similar Change
NAME	ROBERTS, MICHELLE M.		3.2 NAME	1 1 公公共政策
STREET ADDRESS	WINTER PARK FL		3.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	D WINTER FARK FL	DELETE	3.4, CITY-ST-ZIP	☐ Change ☐ Addition
NAME	DANN, GLENA C.	~	4.2 NAME	;
STREET ADDRESS	AAT 4 0144 415 407 407		4.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL 32792		4.4 CITY-ST-ZIP ***	
TITLE	77.7.1.2.1.7.7.11.1.1.2.02.7.02	DELETE	5.1 TITLE	Change Addition
NAME	}		5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE	~~	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	Ì
STREET ADDRESS	Í		6.3 STREET ADDRESS	
CITY ST-7IP			6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filling 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

AND THE USE SAIRE

4-7-99 407-678-662

CR2E034 (11/98)