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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Jan 28 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L60750

(1)

GREAT BEGINNINGS PRE SCHOOL OF TAMPA, INC.

Principal Place of Business C/O ANTA A.SANCHEZ 4003 MANHATTAN AVENUE TAMPA FL 33611		Mailing Ac	idress			ı iddisəli 640 altı gölli sadel dini səsi oldu didik didik dibli stalı bibli isdi			
			A.SANCHEZ IATTAN AVENL 33611-1215	JE					
						3. Date Incorporated or Qualified 03/23/1990	3a. Date of 03/21/1		rt
2. Principal P	lace of Business	2a. Mailing	Address			4. FEI Number		Applie	d For
21		26				59-3006412		 	pplicable
Suite, Apt.	#, etc.	Suite, /	Apt. #, etc.			5. Certificate of Status Desired		8.75 Addi Fee Requir	
City & Stat	е	City &	State			6. Election Campaign Financing	\$	5.00 May	v Be
23	A CHANGE CONTRACTOR A BURNISH OF THE PARAMETER OF THE	28				Trust Fund Contribution		Added to Fe	
Zip	Country	Zip		Country	1	8. This corporation has liability for i	ntangible tax u	ınder s. 199	9.032,
24	25	29		30			Yes X No		
	9, Name and Address of Cur	rent Registered A	gent		T	10. Name and Address of New Re	gistered Agen	<u>,† </u>	
SAN	ichez, anita a.			81	Name				
	3 MANHATTAN AVENUE			82	Street Add	fress (P.O. Box Number is Not Acceptab	le)		
TAM	PA FL 33611			 					
				83					
•				84	City		85	Zip Cod	le
					L		FL 85		
						rporation submits this statement for the pation's board of directors. I hereby accep			
agent. La	im familiar with, and accept the ob	oligations of, Section	n 607.0505, F	lorida Statute	s.	ation's board or directors. Thereby Becop	it trie appointi	ioni as regi	ISICIOO
SIGNATURE									
	Signarize typical or punted name of registered		le (NO		ent signature requ	ured when rainstating)	DATE		
12.	, , _ , 	AND DIRECTORS	T DELETE	13.		ADDITIONS/CHANGES TO OFFIC			
TITLE	PST		DELETE	1.1 TITLE			□ (Change	Addition
NAME	SANCHEZ, ANITA A.			1.2 NAME					
STREET ADDRESS	403-B S. WILLOW AV.			1.3 STREE	ADDRESS				
CITY - ST - ZIP	TAMPA FL			1.4 CITY - 5	ST-ZIP				
TITLE	D		DELETE	2.1 TITLE			L) (Change	Addition
NAME	SANCHEZ, ANITA A.			2.2 NAME					
STREET ADDRESS	403-B S. WILLOW AV.			2.3 STREE	T ADDRESS				
CITY - ST - ZIP	TAMPA FL			2. 4 CITY-	ST-ZIP				
TITLE	VD		DETELE	3.1 TITLE				Change 🗌	Addition
NAME	SANCHEZ, BRIAN			3.2 NAME					
STREET ADDRESS	9520 84THWAY N			3.3 STREE	ADDRESS				
CITY+ST-ZIP	SEMINOLE FL			3 4. CITY -	ST-ZIP				
TITLE			☐ DELETE	4.1 TITLE				Change	Addition
NAME				4. 2 NAME					
STREET ADDRESS				4.3 STREET	T ADDRESS				
City - ST - ZIP				4.4 CITY -					
TITLE			DELETE	5.1 TITLE				Change [Addition
NAME				5.2 NAME				_	
STREET ADDRESS					ADDRESS		NB	6-09	SZ
CITY - ST - ZIP				5.4 CITY - 5			NO	10	ひ
TITLE		TO BUT THE MARKET A LIBERTAN AND AREA . THE THEFAT ENGINEERING	DELETE	6.1 T(TLE	J. 411		المراب و و و	Shange F	Addition
NAME				6.2 NAME		60000207 -01/29/97010 ***165.00	മ ാ തി സഹംപാവ	>	
					TADDBECC	###10E_00 ###10E_00	55 UU4		
STREET ADDRESS					T ADDRESS	***103.UU			
CITY - ST - ZIP	l .			6.4 CITY -:	SI-ZIP				

14. I do 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 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 charged or on an attachment with an address.

SIGNATURE: And A Sanchez 1-23-97 (\$13) \$35-4591