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

CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(8)

BEULAH'S PRE-K AND LEARNING CENTER. INC.

ulah

FILED Feb 05 1998 8:00am Secretary of State

C/O BEULAH	ce of Business I BLACK AVERY STREET	Mailing Address C/O BEULAH BLACK 1505 WEST AVERY STR	FET	·	
PENSACOLA FL 32501 PENSACOLA FL 32501			LLI		DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
2. Principal P	Place of Business	2a. Mailing Address	- n-12		07/06/1990 4. FEI Number Applied For
21		26			59-3016822 Not Application
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional
22 City & State		City & State	City & State		Fee Required
23		28			B. Election Campaign Financing \$5.00 May Be Trust Fund Contribution
Zip	Country	Zip	Countr	у	This corporation owes or has paid the current year Intangible
24	25	29	30		Personal Property Tax due June 30. Yes No
DI /	 Name and Address of Curr ACK, BEULAH 	rent Registered Agent	81	Name	10, Name and Address of New Registered Agent
	2 West Moreno Street		Ľ		
	NSACOLA FL 32501		82	Street Add	dress (P.O. Box Number is Not Acceptable)
			83		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
			84	City	85 Zip Code
44.5				i '	┡┖╎╎
Office of the	egistered agent, or both, in the Sta	tie of Florida. Such change was	authorized b	y the corpora	poration submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
agent. i a	m familiar with, and accept the ob-	ligations of, Section 607.0505, F	lorida Statute	S.	, , , ,
SIGNATURE	Signature, typed or printed name of registered	agent and tille if applicable. (NO	TE: Registered Ag	ent signature requi	vired when reinstating) DATE.
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		☐ Change ☐ Additio
NAME	BLACK, WANDA		12 NAME		
STREET ADDRESS	1505 WEST AVERY ST. PENSACOLA FL		1.3 STREET	ADDRESS	
CITY-ST-ZIP TITLE	D PENSAGOLA FL	DELETE	1.4 CITY - 9	ST-ZIP	
NAME	BLACK, BEULAH		2.1 TITLE 2.2 NAME		☐ Change ☐ Additio
STREET ADDRESS	1505 WEST AVERY ST.		2.3 STREET	Annaecc	
CITY-ST-ZIP	PENSACOLA FL		2.4 CiTY-		
TITLE		DELETE	3.1 TITLE		Change Additio
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET	ADDRESS	
CITY-ST-ZIP		T DELETE	3.4. CITY-	ST- 7IP	
TITLE NAME		L_ OELETE	4.1 TITLE		☐ Change ☐ Addition
STREET ADDRESS			4. 2 NAME 4.3 STREET	ADDRESS	
CITY-ST-ZIP			4.3 STREET		
TITLE	<u> </u>	DELETE	5.1 TATLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET	ADDRESS	
CITY-ST-ZIP			5.4 CITY - S	T- ZIP	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS			6.2 NAME	*DODITOO	
CITY-ST-ZIP			6.3 STREET 6.4 City - S		
14. I hereby co	ertify that the information supplied	with this filing does not qualify for	or the exemp	ion stated in	Section 119.07(3)(i), Florida Statutes. I further certify that the information
officer or d	on this annual report of supplemen	ital annual report is true and acc ceiver or trustee empowered to	urate and tha	utennia um tr	re shall have the same legal effect as if made under oath, that I am an uired by Chapter 607, Florida Statutes; and that my name appears in