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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997

2. Principal Place of Business



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M09857

28. Mailing Address

LITTLE SKIPPERS PRE-SCHOOL AND KINDERGARTEN, INC

Principal Place of Business Mailing Address 9201 N.W. 4TH AVENUE 9201 N.W. 4TH AVENUE MIAMI FL 33150-2118 MIAMI FL 83150

**FILED** Apr 18 1997 8:00am Secretary of State



3a. Date of Last Report

Applied For

05/01/1996

Date Incorporated or Qualified

01/10/1985

4. FEI Number

21		26				59~2488824		No	t Applicable
Suite, Apt.	#, etc.	Suite, A	pt. #, etc.			5. Certificate of Status Desired		\$8.75 A	
City & Stal	le	City & S	itate			6. Election Campaign Financing	[···]	\$5.00	
23 Zip	Country	28	<del></del>	Counte	<del>,</del>	Trust Fund Contribution		Added to	
	<u></u> ⊢ ′	Zip	<u> </u>	∵Country □1	<i>(</i>	8. This corporation has liability for			199,032,
24	25 S. Name and Address of Current	29	30	0]		Florida Statutes  10. Name and Address of New R	Yes		
U/A		Togratered Ag		81	Name DA	To: Walle and Address of New K	ofision vi	Joint	
	SHINGTON, PATRICIA			}*	VA	TRICIA DAVIE			
	NE 100TH. ST.			82	Street Addre	ss (P.O. Box Number is Not Accepta	ible)		
MIA	MI FL 33138			83	PR / AI	17.000	<del></del>		
				63	<i>'10 N</i>	.E. 1004 5T.			
				84	City M	IMI GHODES	FL	85 Zip	ode 4
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508.	Florida Statules	the abov	1	ration submits this statement for the		hanging its	s registered
office or i	registered agent, or both, in the State o	l Florida. Such	change was aut	horized b	y the corporatio	in's board of directors. I hereby acce	pt the appo	ntment as	registered
•	am familiar with, and accept the obligati	ons or, Section	007.0005, FI0fit	ua Sigiule	ъ.				
SIGNATURE	Signature, typed or printed hame of registered agent	and little it sont ceble	(NOW F	icoistered Ag	ent signature required	twhen reinstation)	DATE		
12.	OFFICERS AND		heert 1	13.	sgroups required	ADDITIONS/CHANGES TO OFFI		DIRECTOR	S IN 12
TITLE	PSD		DELETE	1.1 TITLE				Change	Addition
NAME	DAVIE, PATRICIA			1.2 NAME					
STREET ADDRESS	70 NE 100TH. ST.			1.3 STREET	ADDRESS I				
CITY-ST-3P	MIAMI FL			1.4 CITY - S					
TITLE		[	DELETE	2.1 TITLE				Change	Addition
NAME				22 NAME	1				
STREET AD RESS				2.3 STREET	ADDRESS				
CITY-ST- P				2 4 CITY-	ST-ZIP				
TITLE			DELETE	3.1 TITLE			[	Change	Addition
NAME				32 NAME	l				
STREET AL RESS				3.3 STRFFT	ADDRESS				
CITY-ST-				3.4 CITY-	ST-ZIP				
TITLE			DELETE	4.1 TITLE				Change	Addition
NAME				4 2 NAME	1				
STREET ALCRESS				4.3 STREET	ADORESS				
CITY-ST-				4.4 CITY - S	ST-ZIP				
TITLE			DELETE	5.1 TITLE				Change	Addition
NAME				5.2 NAME	1				
STREET A ESS				5.3 STREET	ADDRESS				
CITY-ST-	]			5.4 CITY - 5	51 - ZIP				
TITLE			DELETE	61 TITLE				Change	Addition
NAME				6.2 NAME					
STREET AD LESS				6.3 STREET	ADDRESS				
CITY-ST-Z	<u></u>			6.4 CITY-5	ST - ZIP				
14. I do herel	by certify that the information supplied	with this filing d	ides not qualify f	or the exc	mption stated i	n Section 119.07(3)(i), Florida Statut	es. I further o	ertify that t	he
mormano	on indicated on this annual report or sup	abiementai <b>ann</b>	uai report is truc	: and acci	arate and mat n	ny signature shall have the same leg	ai enect as i	made und	ier oaur, mat

Tam 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 op an attachment with an address.