

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M38630

FILED  
Feb 08, 2012  
Secretary of State

Entity Name: DISCOVERY DAY CARE, INC.

**Current Principal Place of Business:**

C/O KATHRYN A. BARIL  
3153 S.W. 67 AVE.  
MIAMI, FL 33155

**New Principal Place of Business:**

**Current Mailing Address:**

C/O KATHRYN A. BARIL  
3153 S.W. 67 AVE.  
MIAMI, FL 33155

**New Mailing Address:**

FEI Number: 59-2718059

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BARIL, KATHRYN A.  
3153 S.W. 67 AVE.  
MIAMI, FL 33155 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: BARIL, ROBERT J.  
Address: 3153 S.W. 67 AVE.  
City-St-Zip: MIAMI, FL

Title: VD  
Name: BARIL, KATHRYN A.  
Address: 3153 S.W. 67 AVE.  
City-St-Zip: MIAMI, FL

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: KATHRYN BARIL

VP

02/08/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date