

FILE # 97-00000000-00000000

APPROVED AND FILED

97 JUL 25 AM 11:51

SECRETARY OF STATE TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M89185 (6) Corporation Name PARK-A-TOT DAY CARE CENTER, INC.



Principal Place of Business: C/O MICHAEL PELAEZ 3809 FIG ST. TAMPA FL 33609 Mailing Address: C/O MICHAEL PELAEZ 3809 FIG ST. TAMPA FL 33609-1217

3. Date Incorporated or Qualified: 07/05/1988 Date of Last Report: 05/01/1996

2. Principal Place of Business (21-24) 2a. Mailing Address (26-29) 4. FEI Number: 59-2946977 Applied For: Not Applicable 5. Certificate of Status Desired: \$8.75 Additional Fee Required 6. Election Campaign Financing: \$5.00 May Be Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes [], No [X]

9. Name and Address of Current Registered Agent: PELAEZ, MICHAEL 3809 FIG STREET TAMPA FL 33609 10. Name and Address of New Registered Agent (81-85)

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Signature, typed printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when retaining) OFFICERS AND DIRECTORS (12-14) ADDITIONAL RELATIVES (15-18) REFLECTIONS IN 12 (19-20)

Form OK, original lost in mail.

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

SIGNATURE: [Signature] 4/25/97 (813) 8773478