

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000006143

1. Entity Name

FOR THE KIDS, INC.

FILED
Sep 21, 2001 8:00 am
Secretary of State

09-21-2001 90002 004 ****70.00

Principal Place of Business

209 DUVAL ST
 KEY WEST FL 33040

Mailing Address

209 DUVAL ST
 KEY WEST FL 33040

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-1047210

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

SIRECI, THOMAS J JR
 402 APPELROUTH LN
 KEY WEST FL 33040

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
 After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
 Department of State

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete

D
 NAME HALPERN, MICHAEL
 STREET ADDRESS 209 DUVAL ST
 CITY-ST-ZIP KEY WEST FL 33040

TITLE ☐ Delete

D
 NAME HALPERN, MICHELE
 STREET ADDRESS 209 DUVAL ST
 CITY-ST-ZIP KEY WEST FL 33040

TITLE ☐ Delete

D
 NAME ROMANOFF, ROBIN
 STREET ADDRESS 209 DUVAL ST
 CITY-ST-ZIP KEY WEST FL 33040

TITLE ☐ Delete

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete

NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

D
 NAME HALPERN, MICHELLE
 STREET ADDRESS 209 Duval St
 CITY-ST-ZIP Key West, FL 33040

TITLE ☒ Change ☐ Addition

D
 NAME ROMANOFF, ROBYN
 STREET ADDRESS 209 Duval St.
 CITY-ST-ZIP Key West, FL 33040

TITLE ☒ Change ☐ Addition

D
 NAME LOCKWOOD, Karen
 STREET ADDRESS 209 Duval St.
 CITY-ST-ZIP Key West, FL 33040

TITLE ☐ Change ☒ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Robyn Romanoff 9/12/01 (305) 296-0760

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CR2E037 (5/01)