

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000000660

Entity Name: COOL KIDS LEARN, INC.

**FILED**  
**Mar 18, 2004**  
**Secretary of State****Current Principal Place of Business:**3900 N.W. 79TH AVE.  
SUITE 478  
MIAMI, FL 33166**New Principal Place of Business:**3900 N.W. 79TH AVE.  
SUITE 211  
MIAMI, FL 33166**Current Mailing Address:**3900 N.W. 79TH AVE.  
SUITE 478  
MIAMI, FL 33166**New Mailing Address:**3900 N.W. 79TH AVE.  
SUITE 211  
MIAMI, FL 33166

FEI Number: 04-3594334

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**KILPATRICK, ANDREA R  
120 JEFFERSON AVE.  
#12009  
MIAMI, FL 33139 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: D ( ) Delete  
Name: KILPATRICK, ANDREA  
Address: 120 JEFFERSON AVE, #12009  
City-St-Zip: MIAMI BEACH, FL 33139Title: D ( ) Delete  
Name: COPELAND, CUTARI  
Address: 1940 SW 120TH TERR  
City-St-Zip: MIRAMAR, FL 33027Title: D ( ) Delete  
Name: DELIMA, DOROTHY  
Address: 17525 SW 33RD COURT  
City-St-Zip: MIRAMAR, FL 33029**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDREA KILPATRICK

D

03/18/2004

Electronic Signature of Signing Officer or Director

Date