

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002410

FILED
Apr 22, 2008
Secretary of State

Entity Name: DIMENSIONS KIDS PROJECT, INC.

Current Principal Place of Business:

2070) W. DIXIE HWY.
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

20700 W. DIXIE HWY.
AVENTURA, FL 33180

New Mailing Address:

FEI Number: 20-2483176

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERSSON, ROBIN
20700 W. DIXIE HWY.
AVENTURA, FL 33180 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: BERSSON, ROBIN
Address: 2240 NE 199 ST.
City-St-Zip: N. MIAMI BEACH, FL 33180

Title: D () Delete
Name: KIRKPATRICK, PAM
Address: 18520 SW 58 ST.
City-St-Zip: SOUTHWEST RANCHES, FL 33332

Title: D () Delete
Name: ROSENBAUM, FREDDA
Address: 3241 SW 53 ST.
City-St-Zip: FT. LAUDERDALE, FL 33314

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 exemption stated in Chapter 119, 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: ROBIN BERSSON

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04/22/2008

Electronic Signature of Signing Officer or Director

Date