

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004924

FILED
Apr 07, 2009
Secretary of State

Entity Name: FUN 4 KIDZ, INC.

Current Principal Place of Business:

8500 SOUTHWEST 212 STREET
#108
MIAMI, FL 33189

New Principal Place of Business:

Current Mailing Address:

8500 SOUTHWEST 212 STREET
#108
MIAMI, FL 33189

New Mailing Address:

FEI Number: 20-2828866

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POST, ANDREW B
8500 SOUTHWEST 212TH STREET
#108
MIAMI, FL 33189 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,P () Delete
Name: POST, ANDREW B
Address: 8500 SOUTHWEST 212 STREET, #108
City-St-Zip: MIAMI, FL 33189

Title: D,VP () Delete
Name: LANDY, RUSSELL
Address: 9864 SOUTHWEST 110TH STREET
City-St-Zip: MIAMI, FL 33176

Title: D,TR () Delete
Name: LEHOCKEY, SCOTT
Address: 17717 SW 86 AVENUE
City-St-Zip: MIAMI, FL 33157

Title: D,S () Delete
Name: ETHRIDGE, MELISSA
Address: 8816 SW 72 STREET #F134
City-St-Zip: MIAMI, FL 33173

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:

Title: D,S (X) Change () Addition
Name: KRAUSE, ERIC
Address: 10 SW S. RIVER DRIVE APT. 1201
City-St-Zip: MIAMI, FL 33130

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: ANDREW B. POST

D, P

04/07/2009

Electronic Signature of Signing Officer or Director

Date