

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 16, 2009
Secretary of State**

DOCUMENT# N08000010206

Entity Name: SHOP FOR KIDS, INC.

Current Principal Place of Business:

1361 WEST 35TH STREET
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

1361 WEST 35TH STREET
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 26-3708941 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAPDEVILA, LERGIA A
1361 W 35TH STREET
HIALEAH, FL 33012 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: P () Delete
Name: ECHEVARRIA, RANDY
Address: 325 SOUTH BISCAYNE BLVD., #4016
City-St-Zip: MIAMI, FL 33131

Title: VP () Delete
Name: CAPDEVILA, MIREYA
Address: 1350 W 35TH STREET
City-St-Zip: HIALEAH, FL 33012

Title: ST () Delete
Name: CAPDEVILA, LERGIA A
Address: 1361 W 35TH STREET
City-St-Zip: HIALEAH, FL 33012

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: LERGIA A CAPDEVILA

ST

04/16/2009

Electronic Signature of Signing Officer or Director

_____ Date