

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42457

FILED  
May 05, 2008  
Secretary of State

Entity Name: KIDCO CHILD CARE INC.

## Current Principal Place of Business:

3630 NE 1ST COURT  
MIAMI, FL 33137 US

## New Principal Place of Business:

## Current Mailing Address:

3630 NE 1ST COURT  
MIAMI, FL 33137 US

## New Mailing Address:

FEI Number: 65-0257588 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

LA VILLA, SILVIA DR  
1013 NW 106 AV CR  
MIAMI, FL 33172 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: VELAZQUEZ-MARTINEZ, NILSA MS  
Address: 12071 SW 126 TR  
City-St-Zip: MIAMI, FL 33186

Title: D ( ) Delete  
Name: SALICHS, SUZANNE  
Address: 1380 NE MIAMI GARDENS DR #220  
City-St-Zip: MIAMI, FL 33179

Title: D ( ) Delete  
Name: ESTHER, CHISHOLM  
Address: 220 NW 47 ST FRONT  
City-St-Zip: MIAMI, FL 33137

Title: D ( ) Delete  
Name: MONUMA, FABIENNE  
Address: 8487 SW 166 PL  
City-St-Zip: MIAMI, FL 33193

Title: D ( ) Delete  
Name: BARRIENTOS, HUGO  
Address: 63 NE 40TH STREET  
City-St-Zip: MIAMI, FL 33137

## 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: ( ) 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: NILSA VELAZQUEZ-MARTINEZ

CEO

05/05/2008

Electronic Signature of Signing Officer or Director

Date