FILE NOW: FILING FEE IS $61.25

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May 20 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000003082 (4)

1. Corporation Name

MIAMI ARTCC CHILD CARE, INC.

Principal Place of Business	Mailing Address
7500 N.W. 58TH STREET MIAMI FL 33166	7500 N.W. 58TH STREET MIAMI FL 33166-3724

3. Date Incorporated or Qualified: 06/20/1994
3a. Date of Last Report: 03/26/1996

2. Principal Place of Business
21
Suite, Apt #, etc.
22
City & State
23
Zip
24
Country
25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip
29
Country
30

4. FEI Number: 65-0527291 — Applied For / Not Applicable

5. Certificate of Status Desired ☑ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
YORK, DANIEL E 7500 N.W. 58TH STREET MIAMI FL 33166	81 Name: DAVID ERIC LINDHOLM 82 Street Address (P.O. Box Number is Not Acceptable): ~~16162~~ 7500 NW 58th STREET 83 84 City: MIAMI FL 85 Zip Code 33166

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: D. E. Lindholm DAVID ERIC LINDHOLM, PRESIDENT — DATE: 4/17/97

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☒ DELETE	1.1 TITLE	DIRECTOR	☐ Change ☒ Addition
NAME	YORK, DANIEL E		1.2 NAME	KAREN R. GREEN	
STREET ADDRESS	9771 S.W. 219 STREET		1.3 STREET ADDRESS	7500 NW 58th St	
CITY-ST-ZIP	MIAMI FL 33190		1.4 CITY-ST-ZIP	MIAMI FL 33166	
TITLE	D	☐ DELETE	2.1 TITLE	KIMBERLY BOSTICK	☐ Change ☒ Addition
NAME	FLYNN, ASELA T		2.2 NAME	4510 S.W. 133rd Ave.	
STREET ADDRESS	8688 S.W. 55TH STREET		2.3 STREET ADDRESS	Ft. Lauderdale, FL 33330	
CITY-ST-ZIP	COOPER CITY FL 33328		2.4 CITY-ST-ZIP	OFFICER (D)	
TITLE	D	☐ DELETE	3.1 TITLE	PAMELA M. GONZALEZ	☐ Change ☒ Addition
NAME	LINDHOLM, DAVID E		3.2 NAME	7321 SW 6th ST	
STREET ADDRESS	16162 S.W. 87TH COURT		3.3 STREET ADDRESS	PLANTATION, FL 33317	
CITY-ST-ZIP	MIAMI FL 33157		3.4 CITY-ST-ZIP	OFFICER (D)	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: DAVID ERIC LINDHOLM PRESIDENT — Date: 4/17/97 — Daytime Phone #: 305 252-7612 H, 305 716-1741 W

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0032059