FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Feb 28 1997 8:00am Secretary of State

DOCUMENT # N940000 03345							
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K.I.D.S. INC.							
Principal Place 44:16. N. FORBES RD. PLANT CITY, FL 33565 813-719-9614							
PLANT CITY, FL 33585							
	813-719-9	314					
					3. Date Incorporated or Qualified	3a. Date of Last Repo	ort
2. Principal Place of Business 2a. Mailing Address				<u> </u>	4, FEI Number	 	ed For
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.					59337175	Not A \$8.75 Ado	pplicable
22					5. Certificate of Status Desired	Fee Requ	I
City & State City & St			tale		6. Election Campaign Financing	\$5.00 Ma	ву Ве
23 Z-p Country		28 Zio	Zip Country		Trust Fund Contribution		
24			30		Florida Statutes		
	9. Name and Address of Curr				10. Name and Address of New Rec	Istered Agent	
181 Name PAMELA Judatt							
82 Street Address (P.O. Box Number is Not Acceptable)							
83 7/10					W. FOIDES KULLI		
			84	City /		85 Zip Coo	i.
				PIG	ent city	FL 33/	566
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 Lam lamilion with, and accept the obligations of, Section 617 0503, Florida Statutes.							
SIGNATURI Signature, typicd or printed harne of registered agent air district if applicable (NOTE Registered Agent signature required when reinstating) OATE							
12.	OFFICERS /	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	·····	N 12
101E P.D	PAMELA OWENS J.	ndah 🗀 DELETE	1.1 TITLE 1.2 NAME			Change	Addition 6
NAME STREET ADDRESS	المسام من ما الماليات		1.3 STREET	ADDRESS	•		033
CITY-S1-ZIP	PLANT CITY FLA 33545			.4 CITY - ST - ZIP			Addition OARS
TITE Sto	ROBERT L. JUDOF	" DELETE	2.1 TITLE			☐ Change [Addition O
NAME P	4114 N. FORDES A	id.	2.2 NAME				
STREET ADDRESS	Plant City, Fl	. 33565	2.3 STREET				
CHY ST 7IF	ROBERT W. OUX		2. 4 CITY+5 3.1 TITLE	11-212		☐ Change	Addition
NAV. TD	5707 ORIENT F	d.	3.2 NAME				
SIRELL ADDRESS	TAINNH, FLA. 3:		3.3 STREET	ADDRESS			
Cally ST ZIP	THEOREM . T. D.	DELETE	3.4 CITY-5	ST-ZIP		Change [Addition
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STREET ADDRESS			4 3 STREET	ADDRESS			
CITY-ST ZIP			4.4 CITY-S	T- ZIP			
TITLE		☐ DELET€	5.1 TITLE			Change	Addition
NAME NAME AUGGGGG			5.2 NAME	ADODECC		Δ	
STREET ADDRESS CITY: ST. ZIP			5 3 STREET 5 4 CITY-S			V/6 2	28/
Till (☐ DELETE	61 TITLE	-="			Addition
NAME			6 2 NAME		000002101880 -03/03/9701016001		
STREET ADDRESS	RESS		63 STREET	ADDRESS	-03/03/9701016001 ***70.00		
City-St-ZiP	iv couldy that the information such	lied with this filing does not gua	64 CITY-S			. I further certify that the	,
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: Parcela Chedal PANCLA Judah 2/13/97 873 719-9414							
SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR Bale Daytimo Phono 4							