



**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 17, 2005 08:00 AM
Secretary of State

DOCUMENT # N97000000341		
1. Entity Name KIDS INTERNATIONAL, INC.		
Principal Place of Business 2927 GANDY BLVD TAMPA, FL 33611 US		Mailing Address 2927 GANDY BLVD TAMPA, FL 33611 US
DO NOT WRITE IN THIS SPACE		
		
02212005 No Chg-NP CR2E037 (10/03)		
4. FEI Number 59-3401795		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent LEARY, DANIEL R. 2927 GANDY BLVD. TAMPA, FL 33611		DO NOT WRITE IN THIS SPACE
5. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE: _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)</small> DATE: _____		
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEARY, DANIEL R 2927 GANDY BLVD. TAMPA, FL 33611	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOLL, KATHY 497 45TH AVE. NE SAINT PETERSBURG, FL 33703	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHULTES, GAYLE A 3301 58TH AVE. N. LOT 332 SAINT PETERSBURG, FL 33714	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
DO NOT WRITE IN THIS SPACE		
12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Daniel R. Leary</u> Daniel R. Leary, Director 3-15-05 813-835-4221 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		