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**Mar 10, 1999 8:00 am**  
**Secretary of State**

03-10-1999 90037 026 \*\*\*\*70.00

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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # N98000003776

1. Corporation Name  
**KIDZ 2000 & BEYOND, INC.**

Principal Place of Business  
 C/O TANYA GULLICK  
 1140 100TH STREET  
 MIAMI FL 33154

Mailing Address  
 C/O TANYA GULLICK  
 1140 100TH STREET  
 MIAMI FL 33154

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 200290-90037-26



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		06/26/1998	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		65-0863620	
City & State		City & State		5. Certificate of Status Desired	
23		28		X \$8.75 Additional Fee Required	
Zip	Country	Zip	Country	6. Election Campaign Financing	
24		29		Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
NEWBURGER REED, ELLEN 1140 100TH STREET MIAMI FL 33154				81 Name	TANYA GULLICK		
				82 Street Address (P.O. Box Number is Not Acceptable)	1140 100TH ST		
				83	BAY HARBOR ISLANDS		
				84 City	MIAMI	85 Zip Code	FL 33154

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 T. Gullick (TANYA GULLICK) DATE March 3rd 1999

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	PTD <input type="checkbox"/> DELETE	1.1 TITLE	VPD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GULLICK, TANYA	1.2 NAME	JON PODELL
STREET ADDRESS	1140 100TH STREET	1.3 STREET ADDRESS	1140 100TH ST
CITY-ST-ZIP	MIAMI FL 33154	1.4 CITY-ST-ZIP	MIAMI, FL 33154
TITLE	VPSD <input type="checkbox"/> DELETE	2.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NEWBURGER REED, ELLEN	2.2 NAME	LEONARD KRAVITZ
STREET ADDRESS	1140 100TH STREET	2.3 STREET ADDRESS	1140 100TH ST
CITY-ST-ZIP	MIAMI FL 33154	2.4 CITY-ST-ZIP	MIAMI, FL 33154
TITLE	VPD <input checked="" type="checkbox"/> DELETE	3.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SIMOWITZ, PERRY	3.2 NAME	MITCHELL CHAIT
STREET ADDRESS	1140 100TH STREET	3.3 STREET ADDRESS	1140 100TH ST
CITY-ST-ZIP	MIAMI FL 33154	3.4 CITY-ST-ZIP	MIAMI, FL 33154
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	LORI GLASSBERG
STREET ADDRESS		4.3 STREET ADDRESS	1140 100TH ST
CITY-ST-ZIP		4.4 CITY-ST-ZIP	MIAMI, FL 33154
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	DAVID KEITH
STREET ADDRESS		5.3 STREET ADDRESS	1140 100TH ST
CITY-ST-ZIP		5.4 CITY-ST-ZIP	MIAMI, FL 33154
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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, with all other like empowered.

SIGNATURE: T. Gullick (TANYA GULLICK) DATE March 3rd 1999 DAYTIME PHONE # 305 864 6010

Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E037 (1/198)