

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Aug 02, 2004
Secretary of State**

DOCUMENT# N98000003776

Entity Name: KIDZ 2000 & BEYOND, INC.

Current Principal Place of Business:

1690 CLEVELAND RD
MIAMI BEACH, FL 33141 US

New Principal Place of Business:

Current Mailing Address:

1690 CLEVELAND RD
MIAMI BEACH, FL 33141 US

New Mailing Address:

FEI Number: 65-0863620 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GULLICK, TANYA
1690 CLEVELAND RD
MIAMI BEACH, FL 33141

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: PTD () Delete
Name: GULLICK, TANYA
Address: 1690 CLEVELAND RD
City-St-Zip: MIAMI, FL 33141

Title: VPSD () Delete
Name: CLARKE, JENNIFER
Address: 1690 CLEVELAND RD
City-St-Zip: MIAMI, FL 33141

Title: VPD () Delete
Name: PODELL, JON
Address: 1690 CLEVELAND RD
City-St-Zip: MIAMI, FL 33141

Title: D () Delete
Name: DAVID, KEITH
Address: 1144 100TH ST
City-St-Zip: MIAMI, FL 33154

Title: D () Delete
Name: NEWBURGER, ELLEN
Address: 1690 CLEVELAND RD
City-St-Zip: MIAMI, FL 33141

Title: D () Delete
Name: GLASSBERG, LORI
Address: 1140 100TH ST.
City-St-Zip: MIAMI, FL 33154

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:

Title: D (X) Change () Addition
Name: GLASSBERG, LORI
Address: 1690 CLEVELAND ROAD
City-St-Zip: MIAMI, FL 33141

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JENNIFER CLARKE

VPSD

08/02/2004

Electronic Signature of Signing Officer or Director

Date