

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002095

FILED
Jul 01, 2004
Secretary of State**Entity Name:** KIDVENTURES, INC.**Current Principal Place of Business:**1516A VENERA AVE
2D FLOOR
CORAL GABLES, FL 33146**New Principal Place of Business:****Current Mailing Address:**1516A VENERA AVE
2D FLOOR
CORAL GABLES, FL 33146**New Mailing Address:****FEI Number:** 65-0914936 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ATRIUM REGISTERED AGENTS, INC.
1500 SAN REMO AVE., STE.125
CORAL GABLES, FL 33146 US**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:** PD () Delete
Name: STAMEN, BOB
Address: 1500 SAN REMO
City-St-Zip: CORAL GABLES, FL 33146**Title:** VPD () Delete
Name: MCCREA, DAN
Address: 6200 SW 6301 CT
City-St-Zip: SOUTH MIAMI, FL 33143**Title:** SD () Delete
Name: MILLER, AMY
Address: 8245 SW 149 DR
City-St-Zip: MIAMI, FL 33148**Title:** T () Delete
Name: DAVIS, BILL CPA
Address: 1320 S DIXIE
City-St-Zip: MIAMI, FL 33146**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change () Addition
Name: STAMEN, ROBERT
Address: 1500 SAN REMO
City-St-Zip: CORAL GABLES, FL 33146**Title:** VPD (X) Change () Addition
Name: COLYER, STEPHEN
Address: 4183 PAMONA AVE.
City-St-Zip: MIAMI, FL 33133**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** TD (X) Change () Addition
Name: DAVIS, BILL CPA
Address: 1320 S DIXIE
City-St-Zip: MIAMI, FL 33146**Title:** D () Change (X) Addition
Name: DAVID, THOMAS
Address: 1428 BRICKELL AVE, 8TH FLOOR
City-St-Zip: MIAMI, FL 33131**Title:** D () Change (X) Addition
Name: JONES, LEROY
Address: 180 NW 62ND ST.
City-St-Zip: MIAMI, FL 33150

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: ROBERT STAMEN

PD

07/01/2004

Electronic Signature of Signing Officer or Director_____
Date

VICENCIO, ALEJANDRO - D
200 S. BISCAYNE BLVD, STE. 3200
MIAMI, FL 33131

TOLLEY, SHAWN - D
9200 S. DADELAND BOULEVARD, STE. 204
MIAMI, FL 33156

SIERRA, SYLVIA - D
12011 SW 29TH TERRACE
MIAMI, FL 33175

PATTERSON, JANICE - D
1600 PULLEN ROAD, 16-H
TALLAHASSEE, FL 32303