

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # NA000003779
1. Corporation Name
4.R KIDS, INC.

FILED
00 JUN 20 PM 3: 23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

Principal Place of Business
5711 ST CHARLES PRADO
ORLANDO FL. 32822

Mailing Address
5711 ST CHARLES PRADO
ORLANDO FL. 32822

2. Principal Place of Business
5711 ST CHARLES PRADO

2a. Mailing Address
5711 ST CHARLES PRADO

Suite, Apt. #, etc.
ORLANDO

Suite, Apt. #, etc.
ORLANDO

City & State
O. FL

City & State
O. FL

Zip
32822

Country
USA

29
USA

30

3. Date Incorporated or Qualified
06/18/99

3a. Date of Last Report
NONE

4. FEI Number
59-3911-723

Applied For
☐ Not Applicable

5. Certificate of Status Desired
☒ \$ 8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ 5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032.
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
ANGELA LOPEZ
5249 WENDALEES COURT
ORLANDO FL. 32812
(DELETE)

10. Name and Address of New Registered Agent
81 Name
CARLOS GARZON
82 Street Address (P.O. Box Number is Not Acceptable)
5711 ST CHARLES PRADO
83
84 City
ORLANDO
85 Zip Code
FL 32822

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE CARLOS GARZON June - 2000
Signature (Typed or printed name of registered agent and fee if applicable) (NOTE: Registered Agent signature required when reappointing) DATE

12. OFFICERS AND DIRECTORS

TITLE
PRESIDENT

NAME
CARLOS GARZON

STREET ADDRESS
5249 WENDALEES CRT ORLANDO

CITY - ST - ZIP

TITLE
SECRETARY (DELETE)

NAME
ANGELA LOPEZ

STREET ADDRESS
5249 WENDALEES CT ORLANDO

CITY - ST - ZIP

TITLE
TREASURER (DELETE)

NAME
ANGELA LOPEZ (DELETE)

STREET ADDRESS
5249 WENDALEES CT ORLANDO

CITY - ST - ZIP

TITLE
FL 32812

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
PRESIDENTE

1.2 NAME
CARLOS GARZON

1.3 STREET ADDRESS
5711 ST. CHARLES PRADO

1.4 CITY - ST - ZIP
ORLANDO FL. 32822

2.1 TITLE
SECRETARY

2.2 NAME
NELSON BETANCOURT

2.3 STREET ADDRESS
5711 ST. CHARLES PRADO

2.4 CITY - ST - ZIP
ORLANDO FL 32822

3.1 TITLE
TREASURER

3.2 NAME
TEODILO CONTRADO

3.3 STREET ADDRESS
P.O. BOX 620393 - ORLANDO FL. 32862

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS
300003325719

4.4 CITY - ST - ZIP
-07/18/00 - 01009 - 007

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS
300003325719

5.4 CITY - ST - ZIP
-07/18/00 - 01009 - 008

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Carlos Garzon - President June - 15 - 2000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date