

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90744 035 ****70.00

DOCUMENT # *N99000003779*

1. Entity Name

4R KIDS, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

7620 ARLENE AVE

Suite, Apt. #, etc.

3. Mailing Address

7620 ARLENE AVE

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

ORLANDO FL

City & State

ORLANDO FL

4. FEI Number

59-3591723

Applied For

Not Applicable

Zip

32812

Country

USA

Zip

32812

Country

USA

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

CARLOS GARZON

Street Address (P.O. Box Number is Not Acceptable)

7620 ARLENE AVE

City

ORLANDO

FL

Zip Code

32812

**DO NOT WRITE
IN THIS SPACE**

8. 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

Carlos Garzon

(NOTE: Registered Agent signature required when reinstating)

DATE

4-28-04

**FEE IS \$61.25
Initial or Amended UBR**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD GARZON CARLOS 7620 ARLENE AVE. ORLANDO FL 32812
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD MOLANO, ANA MERCEDES 7620 ARLENE AVE ORLANDO FL 32812
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD PORTICH CARMEN S. 15-47 160TH STREET WHITESTONE NY 11357
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Carlos Garzon - **CARLOS GARZON** - **4-28-04** / **407**
2518239

CR2E037B (12/02)