

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

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91156 016 *****61.25

DOCUMENT # N 9900000 6633

1. Entity Name

Kids on Computers, Inc

DO NOT WRITE IN THIS SPACE

11040833

2. Principal Place of Business

1830 Lake Drive

Suite, Apt. #, etc.

3. Mailing Address

1830 Lake Drive

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Delray Beach Florida

City & State

Delray Beach Florida

4. FEI Number

65-0960039

Applied For

Not Applicable

Zip

33444

Country

USA

Zip

33444

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Beverly Caruso

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

1830 Lake Drive

City

Delray Beach

FL

Zip Code

33444

**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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**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
Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Beverly Caruso
1830 Lake Drive
Delray Beach Florida 33444

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Raul Barker
1830 Lake Drive
Delray Beach Florida 33444

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Richard Gross
1830 Lake Drive
Delray Beach Florida 33444

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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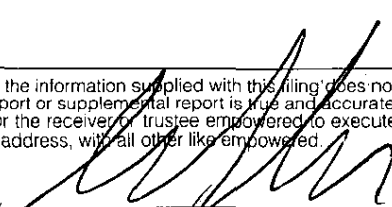
TITLE
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CITY-ST-ZIP

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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:

 Director

4-29-03 9544217771

CR2E037B (12/01)