

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000009652

Entity Name: BUS-A-KID, INC.

FILED  
May 01, 2006  
Secretary of State

## Current Principal Place of Business:

P.O.BOX 17-3452  
HIALEAH, FL 33017

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 17-3452  
HIALEAH, FL 33017

## New Mailing Address:

FEI Number: 65-0977212

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

APONTE, IVETTE  
P.O.BOX 17-3452  
HIALEAH, FL 33017 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: APONTE, IVETTE  
Address: 4949 NW 179 STREET  
City-St-Zip: CAROL CITY, FL 33055

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: APONTE, IVETTE  
Address: 4940 NW 179 STREET  
City-St-Zip: CAROL CITY, FL 33055

Title: DIR ( ) Change (X) Addition  
Name: MATIAS, GERARDO  
Address: 4940 NW 179 STREET  
City-St-Zip: CAROL CITY, FL 33055

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: IVETTE APONTE

PD

05/01/2006

Electronic Signature of Signing Officer or Director

Date