

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000033897

Entity Name: ALL ABOUT BABIES, INC.

FILED  
Apr 29, 2004  
Secretary of State

**Current Principal Place of Business:**

7600 DOCTOR PHILLIPS BLVD  
22  
ORLANDO, FL 32819

**New Principal Place of Business:**

**Current Mailing Address:**

7600 DOCTOR PHILLIPS BLVD  
22  
ORLANDO, FL 32819

**New Mailing Address:**

FEI Number: 59-3640807      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WILSON, MARA  
454 DREXEL RIDGE CR.  
OCOEE, FL 34761

**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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title:                        ( ) Delete  
Name:            WILSON, MARA  
Address:        454 DREXEL RIDGE CIRCLE  
City-St-Zip:    OCOEE, FL 34761

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:                        (X) Change ( ) Addition  
Name:            WILSON, MARA E PRES  
Address:        454 DREXEL RIDGE CIRCLE  
City-St-Zip:    OCOEE, FL 34761

Title:                        ( ) Change (X) Addition  
Name:            WINSLOW, MICHELLE A SEC  
Address:        4942 WISE BIRD DRIVE  
City-St-Zip:    WINDERMERE, FL 34786

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHELLE WINSLOW

SEC

04/29/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date