


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 16, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000064340	
1. Entity Name IT'S KIDZ TIME OF RIVERVIEW, INC.	

Principal Place of Business 11329 BIG BEND ROAD RIVERVIEW, FL 33569	Mailing Address 12925 ASTORWOOD PLACE RIVERVIEW, FL 33569
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04112004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3660383	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MCDERMOTT, MICHAEL J 791 WEST LUMSDEN ROAD BRANDON, FL 33511

**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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **DATE** _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

U000000115227
04/16/04-80016-008 150.00

10. OFFICERS AND DIRECTORS	
TITLE	D
NAME	HANSHEW-BARRETT, DIANA V
STREET ADDRESS	12925 ASTORWOOD PLACE
CITY-ST-ZIP	RIVERVIEW, FL 33569
TITLE	VP
NAME	VACCARO, ELEANOR
STREET ADDRESS	11505 SMOKETHORN DRIVE
CITY-ST-ZIP	RIVERVIEW, FL 33569
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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Diana V Hanshaw-Barrett 4/12/04 (813) 677-6312
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #