

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000093809

FILED
Apr 15, 2005
Secretary of State

Entity Name: FAMILY ACADEMY 4 KIDS, INC.

Current Principal Place of Business:

480 NE 143RD ST.
N. MIAMI, FL 33161

New Principal Place of Business:

1140 99TH STREET
UNIT #2
BAY HARBOR ISLANDS, FL 33154

Current Mailing Address:

480 NE 143RD ST.
N. MIAMI, FL 33161

New Mailing Address:

1140 99TH STREET
UNIT #2
BAY HARBOR ISLANDS, FL 33154

FEI Number: 65-1045627

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWIS-SUTTON, TRENAYE
480 NE 143RD ST.
N. MIAMI, FL 33161 US

Name and Address of New Registered Agent:

LEWIS-SUTTON, TRENAYE
1140 99TH STREET
UNIT #2
BAY HARBOR ISLANDS, FL 33154 US

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:

04/15/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LEWIS-SUTTON, TRENAYE
Address: 480 NE 143RD ST.
City-St-Zip: N. MIAMI, FL 33161

Title: D () Delete
Name: LEWIS-SUTTON, LAMAR
Address: 480 NE 143RD ST.
City-St-Zip: N. MIAMI, FL 33161

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LEWIS-SUTTON, TRENAYE
Address: 1140 99TH STREET, UNIT #2
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

Title: D (X) Change () Addition
Name: LEWIS-SUTTON, LAMAR
Address: 1140 99TH STREET, UNIT #2
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

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: LAMAR LEWIS-SUTTON

D

04/15/2005

Electronic Signature of Signing Officer or Director

Date