

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 22, 2002 8:00 am
Secretary of State

09-22-2002 90060 012 ***558.75

DOCUMENT # P00000112561

1. Entity Name
INTERNET BABY CHILD DAY CARE, INC.

Principal Place of Business

15216 S.W. 167TH ST.
 MIAMI FL 33197

Mailing Address

15216 S.W. 167TH ST.
 MIAMI FL 33197

2. Principal Place of Business

15216 SW 167 ST

3. Mailing Address

15216 SW 167th ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FL 33197

City & State

MIAMI, FL

4. FEI Number

65-1061095

Applied For

Not Applicable

Zip

33197

Country

USA

Zip

33197

Country

USA

5. Certificate of Status Desired

☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

CASERTA, SILVIA
 15216 S.W. 167TH ST.
 MIAMI FL 33197

7. Name and Address of New Registered Agent

Name CASERTA, SILVIA

Street Address (P.O. Box Number is Not Acceptable) 7585 SW 152 AVE G-204

City MIAMI

FL

Zip Code 33193

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]* SILVIA CASERTA

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME CASERTA, SILVIA
STREET ADDRESS 7585 S.W. 152ND AVE. G204
CITY-ST-ZIP MIAMI FL 33193

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☐ Delete
NAME ROJAS, IDALIA
STREET ADDRESS 15216 S.W. 167TH ST.
CITY-ST-ZIP MIAMI FL 33197

TITLE VP ☒ Change ☐ Addition
NAME ROJAS, IDALIA
STREET ADDRESS 15216 SW 167th ST
CITY-ST-ZIP MIAMI, FL 33197

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☐ Change ☒ Addition
NAME TERESA BARRIOS-LAZCANO
STREET ADDRESS 14844 SW 97 terrace
CITY-ST-ZIP MIAMI, FL 33186

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature] REQUESTER SILVIA CASERTA

Date

Daytime Phone #

9/12/02 305 318-1440

CR2E034 (4/02)