2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE

FILED May 02, 2008 08:00 AN Secretary of State **DOCUMENT # P01000001996** 1. Entity Name KIDZ ZONE, INC. Principal Place of Business Mailing Address 8553 WAKULLA SPRINGS RD 8553 WAKULLA SPRINGS RD TALLAHASSEE, FL 32310 TALLAHASSEE, FL 32310 04302008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3694463 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE STEELE, BOBBY 8552 WAKULLA SPRINGS RD TALLAHASSEE, FL 32310 IN THIS SPACE 8. The above named entity submits this statement of the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familjar with, and accept the obligations of registered agent SIGNATURE (NOTE: Registered Agent signature required when reinstating) estered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be U00000945351 FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 05/30/08-80004-020 150.00 OFFICERS AND DIRECTORS 10. TITLE NAME STEELE, BOBBY L 8553 WAKULLA SPRINGS RD STREET ADDRESS CITY-ST-ZIP TALLAHASSEE, FL 32305 D MLE STEELE, REBEKAH J NAME 8553 WAKULLA SPRINGS RD STREET ADDRESS TALLAHASSEE, FL 32305 CITY-ST-ZIF TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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,

E OF SIGNING OFFICER OR DIRECTOR

Davime Phone #