## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

UNIFORM, BUSINESS REPORT (U	JBR)
DOCUMENT # P01000049059	FILED
1. Entity Name	03 OCT 27 AM 9: 26
IELE-1078 CHUDCARE TNC.	SECRETARY OF STATE FALLAHASSEE, PLORIDA
DO MOTIMBIE IN THE COM	CE TALLAHASSEE PLORIDA
DO NOT WRITE IN THIS SPA	CE / S
2. Principal Place of Business 1427 N PINE HILLS RD 1427 N PINE 1	HILLS RD
Suite, Apt. #, etc. Suite, Apt. #, etc.	REINSTATEINENT 03
City & State ORLANDO FI ORLANDO FI	4. FEI Number Applied For S9-37/8896 Not Applicable
	5. Certificate of Status Desired 55. Securificate of Status Desired 56. Securificate 56.
3,000	7. Name and Address of Current Registered Agent
DO NOT WRITE	Name 1-YSANDER THORPE  Street Address (P.O. Box Number is Not Acceptable)
IN THIS SPACE	
11110 017402	City OCLONDO FL THEODER
The above named entity submit this statement for the purpose of changing its register.	UNUA/1000 - 3281/
5. The above trained criticity story was stated in the purpose of state grid to regular	10/1/02
SIGNATURE Signature, typed of 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)  January 1 - May 1 - Fee is \$150.00  After May 1, Fee is \$550.00  Amended UBR is \$61:25  Trust Fund Contribution.  10. Election Campaign Financing Trust Fund Contribution.	
11. OFFICERS AND DIRECTORS	
NAME VERNITA STEELE STREET ADDRESS 1427 N. PINE HUW ROAD ST	ITILE IAME ITREET ADDRESS ITY-ST-ZIP
TITLE	10707715 00 1077715 00 1077715 00
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	IN THIS SPACE
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	TREET ADDRESS ITY-ST-ZIP
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13. I horaby cortify that the information cumplied with this filling close not qualify for the ex-	xemption 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 on an attachment with an address, with all other like empowered.	
SIGNATURE:   SIGNATURE:   SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  10 /16/03 407-294-4499  Date  Date  Description Priorie #	

in a various production of the state of the

October 16, 2003

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Dear Sirs:

Re: (Tele-Tots Childcare, Inc.)
Document No. P01000049059

We enclose herewith the Uniform Business Report for the year 2003 along with the fee of One Hundred and Fifty Dollars (\$150.00). Our mail was rerouted incorrectly, and we never received our Uniform Business Report. Our Accountant recently made us aware that we had not submitted our Uniform Business Report for the year 2003, which we enclose.

We realize that this report is late in coming and request an abatement of any associated penalties. Again, we apologize for the delay.

Respectfully,

Vernita Steele

-President -