## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000001564

Entity Name: TINY TREASURES ACADEMY AND GET WELL CENTER, INC.

FILED Apr 26, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5559 SOUTH UNIVERSITY DRIVE DAVIE, FL 33328

Current Mailing Address: New Mailing Address:

5559 SOUTH UNIVERSITY DRIVE DAVIE, FL 33328

FEI Number: 30-0006338 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GASS, P.A., DANIEL G
10001 NW 50TH ST. #204
SUNRISE, FL 33351 US
1INY TREASURES ACADEMY
5559 SOUTH UNIVERSITY DR
DAVIE, FL 33328 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: TINY TREASURES ACADEMY 04/26/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 BOYD, RACHEL K
 Name:
 BOYD, RACHEL K

 Address:
 500 NORTHWEST 141ST AVENUE
 Address:
 5559 S UNIVERSITY DR

 City-St-Zip:
 PEMBROKE PINES, FL 33028
 City-St-Zip:
 DAVIE, FL 33328

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: RACHEL K BOYD PD 04/26/2004