
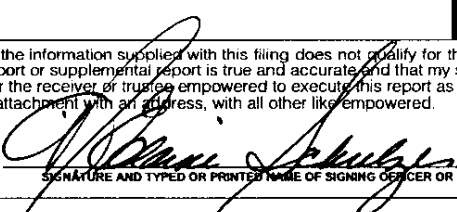


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 05, 2007 8:00 am
Secretary of State

07-05-2007 90058 006 ***150.00

DOCUMENT # P02000004279 1. Entity Name PLAYCARE AT VICTORIA PARK INC					
Principal Place of Business 1500 NE 4TH PL. FT. LAUDERDALE, FL 33301			Mailing Address 1500 NE 4TH PL. FT. LAUDERDALE, FL 33301		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 03-0388400	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent SCHULZE, M. ELAINE 1500 NE 4TH PL. FT. LAUDERDALE, FL 33301				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				\$8.75 Additional Fee Required	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS SCHULZE, M. ELAINE 1500 NE 4 PL FORT LAUDERDALE, FL 33301 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT SCHULZE, RICHARD P 1500 NE 4 PL FORT LAUDERDALE, FL 33301 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby 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, with all other like empowered.					
SIGNATURE: 			Date 7-3-07 Daytime Phone #		

40122845



07032007 Chg-P CR2E034 (12/06)

ATTACHMENT
40122845
#P02000004279

M.E. Schulze

From: "corphelp" <corphelp@dos.state.fl.us>
To: "M.E. Schulze" <ForChildren1st@msn.com>
Sent: Monday, July 02, 2007 10:10 AM
Subject: RE: Paid Corp. Filing

The filing you made online was not an annual report filing, but was an attempt to start a new corporation. Copied below is the e-mail that was sent to you about this. Please call the number shown in the letter below, and please also file your annual report. When you file your report, please check off the box in the section in red print, so that you are not charged a late fee.

If you have any questions about your report filing, please call our Annual Report section at (850) 245-6056, extension 4.

Thank you.

7/2 [Signature] Eula OGI Timeout!

Lee Rivers
Internet Access
Division of Corporations

Email from January:

Document Number: W07000001410

P02000004279

Entity Name: PLAYCARE AT VICTORIA PARK, INC.

Tracking Number: 200083222062

Pin Number: 2062

We received your online transmitted document. However, the document has not been filed for the following:

The corporation was previously filed on 01/09/2002. Please contact our office about a possible refund.

If you have any further questions concerning your filing, please call **850-245-6972**.

Doris Brown

Document Specialist~~~~Letter Number: 070110121744-200083222062 New Filing Section

Letter Number: 070110121744-200083222062