

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000081346

FILED
Mar 30, 2005
Secretary of State

Entity Name: RHYTHM KIDZ INC.

Current Principal Place of Business:

22727 SILLS LOOP
LAND O LAKES, FL 34639 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 162
LAND O LAKES, FL 34639 US

New Mailing Address:

FEI Number: 06-1641104

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOBIK, CRAIG D
22727 SILLS LOOP
LAND O LAKES, FL 34639 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BOBIK, CRAIG
Address: 22727 SILLS LOOP
City-St-Zip: LAND O LAKES, FL 34639

Title: VP () Delete
Name: BOBIK, CHAD
Address: 10406 NW TH CT
City-St-Zip: FORT LAUDERDALE, FL 33324

Title: T () Delete
Name: BOBIK, DANA J
Address: 22227 SILLS LOOP
City-St-Zip: LAND O LAKES, FL 34639

Title: S () Delete
Name: BOBIK, DANA S
Address: 10406 NWTH CT
City-St-Zip: FORT LAUDERDALE, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CRAIG BOBIK

PRES

03/30/2005

Electronic Signature of Signing Officer or Director

_____ Date