

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000087422

FILED  
Jan 19, 2004  
Secretary of State

Entity Name: MY SECOND HOME PRESCHOOL AT SHERIDAN ST, INC

## Current Principal Place of Business:

2514 SHERIDAN STREET  
HOLYWOOD, FL 33020

## New Principal Place of Business:

1540 SW 191 TERRACE  
PEMBROKE PINES, FL 33029

## Current Mailing Address:

1440 CORAL RIDGE DRIVE  
PMB 125  
CORAL SPRINGS, FL 33071

## New Mailing Address:

FEI Number: 14-1842261      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBLES, FERNANDO  
1440 CORAL RIDGE DRIVE  
PMB 125  
CORAL SPRINGS, FL 33071

## 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: ROBLES, FERNANDO  
Address: 1440 CORAL RIDGE DRIVE # 125  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: S ( ) Delete  
Name: ROBLES, FERNANDO  
Address: 1440 CORAL RIDGE DRIVE# 125  
City-St-Zip: CORAL SPRINGS, FL 33071

Title: T ( ) Delete  
Name: ROBLES, FERNANDO  
Address: 1440 CORAL RIDGE DRIVE # 125  
City-St-Zip: CORAL SPRINGS, FL 33071

## 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:

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: FERNANDO ROBLES

P

01/19/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date