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Apr 14, 2003 8:00 am
Secretary of State

03-21-2003 90113 016 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

55025116

DOCUMENT # P02000114718

1. Entity Name
KIDS LIKE TO PARTY RENTAL, INC.

Principal Place of Business	Mailing Address
12441 SW 190 ST. MIAMI, FL 33177	12441 SW 190 ST. MIAMI, FL 33177

X CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
12441 SW 190 ST	12441 SW 190 ST
Suite, Apt #, etc.	Suite, Apt. #, etc.
City & State: MIAMI Fl	City & State: MIAMI Fl
Zip: 33177 Country: USA	Zip: 33177 Country: USA

4. FEI Number: 35-2185262 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GONZALEZ, ALISA
12441 SW 190 ST.
MIAMI, FL 33177

7. Name and Address of New Registered Agent

Name: GONZALEZ, ALISA
Street Address (P.O. Box Number is Not Acceptable): 12441 SW 190 ST
City: MIAMI Fl FL Zip Code: 33177

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.

SIGNATURE: [signature] ALISA GONZALEZ — DATE: 3/13/03

9. Election Campaign Financing Trust Fund Contribution. ☐ — $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	GONZALEZ, ALISA		NAME		
STREET ADDRESS	12441 SW 190 ST.		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33177		CITY-ST-ZIP		
TITLE	VD	X Delete	TITLE		☐ Change ☐ Addition
NAME	GONZALEZ, RAUL		NAME		
STREET ADDRESS	12441 SW 190 ST.		STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33177		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify 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 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: [signature] ALISA GONZALEZ — 3/13/03 — 305-254-1587

CR2E034 (10/02)