2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000051560

Entity Name: BUSY LITTLE ANGELS CHILD CARE CENTER, INC.

FILED Sep 03, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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850 IVES DAIRY RD., STE. T57/414 7410 NW 4TH STREET NORTH MIAMI BEACH, FL 33179

SUITE 205

PLANTATION, FL 33317

Current Mailing Address: New Mailing Address:

850 IVES DAIRY RD., STE. T57/414 7410 NW 4TH STREET NORTH MIAMI BEACH, FL 33179 SUITE 205

PLANTATION, FL 33317

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

MOORE, THOMANIK 850 IVEŚ DAIRY RD., STE. T57/414 NORTH MIAMI BEACH, FL 33179

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

MOORE, THOMANIK MOORE, THOMANIK Name: Name: 850 IVES DAIRY RD., STE. T57/414 7410 NW 4TH STREET Address: Address: #205

City-St-Zip: NORTH MIAMI BEACH, FL 33179 City-St-Zip: PLANTATION, FL 33317

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

Name: MARZAN, EDNA Name: MARZAN, EDNA

850 IVES DAIRY RD., STE. T57/414 7410 NW 4TH STREET Address: Address: #205 NORTH MIAMI BEACH, FL 33179 PLANTATION, FL 33317 City-St-Zip: City-St-Zip:

() Delete Title: Title: (X) Change () Addition BREWER, JEBORIA BREWER, JEBORIA Name: Name:

850 IVES DAIRY RD., STE. T57/414 7410 NW 4TH STREET #205 Address: Address:

City-St-Zip: NORTH MIAMI BEACH, FL 33179 City-St-Zip: PLANTATION, FL 33317

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: THOMANIK MOORE **PSD** 09/03/2004