2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000111003

Entity Name: FOR MOMS & KIDS, INC.

FILED Apr 28, 2004 Secretary of State

12861 SW 147TH LANE RD. MIAMI, FL 33186

Current Mailing Address: New Mailing Address:

12861 SW 147TH LANE RD. MIAMI, FL 33186

FEI Number: 02-0708683 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 US

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.

Name: Address:

City-St-Zip:

SIGNATURE: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

12861 SW 147TH LANE RD.

MIAMI, FL 30186

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 ROSES, BETSAIDA B
 Name:
 ROSES, BETSAIDA B

 Address:
 12861 SW 147TH LANE RD.
 Address:
 12861 SW 147TH LANE RD.

City-St-Zip: MIAMI, FL 30186 City-St-Zip: MIAMI, FL 33186

Title: VD () Delete Title: VD (X) Change () Addition Name: ROSES, RALPH Name: ROSES, RALPH

 Name:
 ROSES, RALPH
 Name:
 ROSES, RALPH

 Address:
 12861 SW 147TH LANE RD.
 Address:
 12861 SW 147TH LANE RD.

City-St-Zip: MIAMI, FL 30186 City-St-Zip: MIAMI, FL 33186

Only of 21p. 1911/14911, 1 E 30100

Title: SD () Delete Title: S/TD (X) Change () Addition Name: BATLLE, CARLOS E Name: BATLLE, MARIA T

Address: 12861 SW 147TH LANE RD. Address: 12861 SW 147TH LANE RD.

City-St-Zip: MIAMI, FL 30186 City-St-Zip: MIAMI, FL 33186

Title: TD (X) Delete Title: () Change () Addition Name: BATLLE, MARIA T Name:

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: BETSAIDA ROSES PD 04/28/2004