

# **2013 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000034742

**FILED**  
**Feb 06, 2013**  
**Secretary of State**

**Entity Name:** KIDSVILLE LEARNING CENTERS INC

**Current Principal Place of Business:**

12604 SW 88 ST  
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

12604 SW 88 ST  
MIAMI, FL 33186

**New Mailing Address:**

**FEI Number:** 20-0787090

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALVAREZ, JOSE F  
12604 NO KENDALL DR  
MIAMI, FL 33186 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:** JOSE ALVAREZ

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** ALVAREZ, MARIA T  
**Address:** 1801 SW 19 AVE  
**City-St-Zip:** MIAMI, FL

**Title:** S  
**Name:** ALVAREZ, CARLOS  
**Address:** 1801 SW 19 AVE  
**City-St-Zip:** MIAMI, FL

I hereby 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 all other like empowered.

**SIGNATURE:** MARIA ALVAREZ

P

02/06/2013

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

\_\_\_\_\_  
Date