2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000163003

1. Entity Name

KIDS ARE ... BROADWAY BOUND, INC.



FILED Feb 11, 2008 08:00 AM Secretary of State

Principal Place of Business

Malling Address

10187 VESTAL CT.

10187 VESTAL CT.

CORAL SPRINGS, FL 33071

CORAL SPRINGS, FL 33071



DO NOT WRITE IN THIS SPACE

01052008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-2140842

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Regulred

6. Name and Address of Current Registered Agent

SHAPIRO, NADINE 10187 VESTAL CT. CORAL SPRINGS, FL 33071

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The above named entity submits this statement for the the obligations of registered agent.	ourpose of changing its registered office or registered agent, or be	oth, in the State of Fiorida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and trite	if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00	9. Election Campaign Financing \$5.00 May Be	U00000823788 02/20/08-80051-024 150.00

10. OFFICERS AND DIRECTORS TITLE NAME SHAPIRO, NADINE 10187 VESTAL CT. STREET ADDRESS CITY-ST-7IP CORAL SPRINGS, FL 33071 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 attactyment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

> MADINE SHAPIKO SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR