


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 20, 2005 8:00 am**  
**Secretary of State**

05-31-2005 90001 008 \*\*\*150.00

<b>DOCUMENT # P04000165525</b> 1. Entity Name <b>IM4KIDS, INC.</b>					
Principal Place of Business <b>1609 MAGNOLIA STREET NEW SMYRNA BEACH, FL 32168</b>			Mailing Address <b>1609 MAGNOLIA STREET NEW SMYRNA BEACH, FL 32168</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent  <b>UNGER, CHRISTOPHER 1609 MAGNOLIA STREET NEW SMYRNA BEACH, FL 32168</b>			7. Name and Address of New Registered Agent  Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ <b>FL</b> Zip Code _____		
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 _____ (NOTE: Registered Agent signature required when renewing) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST UNGER, CHRISTOPHER 1609 MAGNOLIA STREET NEW SMYRNA BEACH, FL 32168		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV UNGER, NANCY S 1609 MAGNOLIA STREET NEW SMYRNA BEACH, FL 32168		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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.					
<b>SIGNATURE:</b> _____			Date <b>5.27.05</b>		

66023385



04222005 Chg-P CR2E034 (10/03)

4. FEI Number **33-1107164** Applied For ☐ Not Applicable ☐

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

# ATTACHMENT

66023385

## BRENT MILLIKAN & COMPANY, P.A. CERTIFIED PUBLIC ACCOUNTANTS

May 25, 2005

Florida Department of State  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Re: IM4Kids, Inc.  
Document # P04000165525  
2005 Annual Report

To Whom it May Concern:

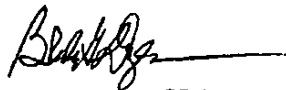
The enclosed Annual Report for the above-referenced corporation is being filed for the first time since incorporating in December 2004. The corporate officer was not familiar with the filing requirements and having only received a postcard notifying them of the requirement to file, did not know how to proceed. According, the report is being filed after the due date of May 1<sup>st</sup>.

Based on these facts we respectfully request an abatement of any additional fee or penalty for this initial filing with the understanding that all future filings will be made on or before the designated May 1<sup>st</sup> deadline. We have instructed our client on the importance of this annual requirement and the client is properly informed on how to file this report and pay the fee online through your website.

If you have any questions regarding this matter, please contact our office. We sincerely appreciate your consideration of this important request.

Thank you.

Sincerely,



Bradley F. Douglas, CPA  
Principal for the firm

Enclosure

cc: Christopher B. Unger, President

ATTACHMENT

66023385  
#104000165525

**BRENT MILLIKAN & COMPANY, P.A.**  
CERTIFIED PUBLIC ACCOUNTANTS

June 8, 2005

Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Re: IM4KIDS, Inc.  
FEI# 33-1107164

Dear Sir or Madam:

Please find enclosed the corrected 2005 Annual Report for the above referenced Taxpayer who is a client of our Firm. As you know, this form was sent back to our client to complete Block 4 (FEI number). At the time of filing, the FEI number had not been assigned and inadvertently the "applied for" box was not marked.

It is our understanding, according to your letter dated June 1, 2005, a copy of which is attached, by sending this corrected Annual Report within thirty days of the date of your letter, the \$400.00 will not be applicable to our client. We apologize for any inconvenience this may have caused and thank you for your kind and able assistance in this matter. If you should have any additional questions, please do not hesitate to communicate with our office.

Sincerely,



Bradley F. Douglas, CPA  
Principal, for the Firm

BFD/jm  
Enclosures