

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000086991

FILED
Apr 30, 2007
Secretary of State

Entity Name: CHILD CARE CONNECTION CONSULTANTS, INC.

Current Principal Place of Business:

7640 NW 186TH STREET
MIAMI, FL 33015

New Principal Place of Business:

Current Mailing Address:

7640 NW 186TH STREET
MIAMI, FL 33015

New Mailing Address:

FEI Number: 20-5173220

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZOMERFELD, RAYMOND J CPA
999 PONCE DE LEON BLVD STE 1045
CORAL GABLES, FL 33134 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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: PIEDRA, RUDY
Address: 7640 NW 186TH STREET
City-St-Zip: MIAMI, FL 33015

Title: DV () Delete
Name: PIEDRA, MARLENT
Address: 7640 NW 186TH STREET
City-St-Zip: MIAMI, FL 33015

Title: DS () Delete
Name: PIEDRA, MISTIQUE
Address: 7640 NW 186TH STREET
City-St-Zip: MIAMI, FL 33015

Title: DT () Delete
Name: PIEDRA, MEILLANY
Address: 7640 NW 186TH STREET
City-St-Zip: MIAMI, FL 33015

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: RUDY PIEDRA

DP

04/30/2007

Electronic Signature of Signing Officer or Director

Date