

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000117953

Entity Name: KIDZ CITY ACADEMY CORP

FILED
Mar 19, 2009
Secretary of State

Current Principal Place of Business:

3920 E 8 AVENUE
HIALEAH, FL 33013

New Principal Place of Business:

3920 E 8 AVENUE
HIALEAH, FL 33013 US

Current Mailing Address:

3920 E 8 AVENUE
HIALEAH, FL 33013

New Mailing Address:

3920 E 8 AVENUE
HIALEAH, FL 33013 US

FEI Number: 26-1294050

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEYVA, LOURDES E
16613 SW 48 TERR
MIAMI, FL 33185 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: P () Delete
Name: ORTIZ, BARBARA
Address: 3920 E 8 AVENUE
City-St-Zip: HIALEAH, FL 33013

Title: VP () Delete
Name: LEYVA, LOURDES E
Address: 16613 SW 48 TERR
City-St-Zip: MIAMI, FL 33185

Title: S () Delete
Name: ORTIZ, BARBARA
Address: 3920 E 8 AVENUE
City-St-Zip: HIALEAH, FL 33013

Title: T () Delete
Name: LEYVA, LOURDES E
Address: 16613 SW 48 TERR
City-St-Zip: MIAMI, FL 33185

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ORTIZ, BARBARA
Address: 3920 E 8 AVENUE
City-St-Zip: HIALEAH, FL 33013 US

Title: VP (X) Change () Addition
Name: LEYVA, LOURDES E
Address: 16613 SW 48 TERR
City-St-Zip: MIAMI, FL 33185 US

Title: S (X) Change () Addition
Name: ORTIZ, BARBARA
Address: 3920 E 8 AVENUE
City-St-Zip: HIALEAH, FL 33013 US

Title: T (X) Change () Addition
Name: LEYVA, LOURDES E
Address: 16613 SW 48 TERR
City-St-Zip: MIAMI, FL 33185 US

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: BARBARA ORTIZ

P

03/19/2009

Electronic Signature of Signing Officer or Director

Date