

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000126730

Entity Name: CANCER KIDS FOUNDATION, INC.

FILED  
May 04, 2009  
Secretary of State

## Current Principal Place of Business:

6065 NORTHWEST 167TH STREET  
SUITE B3  
MIAMI, FL 33015

## New Principal Place of Business:

## Current Mailing Address:

6065 NORTHWEST 167TH STREET  
SUITE B3  
MIAMI, FL 33015

## New Mailing Address:

FEI Number: 26-1471732      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: COWAN, DELROY  
Address: 6065 NORTHWEST 167TH STREET SUITE B3  
City-St-Zip: MIAMI, FL 33015

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP ( ) Change (X) Addition  
Name: COWAN, EARL  
Address: 6065 NORTHWEST 167TH STREET, SUITE B-3  
City-St-Zip: MIAMI, FL 33015

Title: DIR ( ) Change (X) Addition  
Name: SALMON, RICHARD  
Address: 6065 NORTHWEST 167TH STREET, SUITE B-3  
City-St-Zip: MIAMI, FL 33015

Title: DIR ( ) Change (X) Addition  
Name: COWAN, HEATHER  
Address: 6065 NORTHWEST 167TH STREET, SUITE B-3  
City-St-Zip: MIAMI, FL 33015

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: DELROY COWAN

PSD

05/04/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date