

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE
 Sandra B. Morham
 Secretary of State
 DIVISION OF CORPORATIONS

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

95 AUG -4 AM 10:57

DOCUMENT # P92000000049 (6)

1. Corporation Name
KIDS PLAY, INC.

Principal Place of Business Mailing Address
1200 N FEDERAL HWY SUITE 305 BOCA RATON FL 33432
1200 N FEDERAL HWY SUITE 305 BOCA RATON FL 33432

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **10/27/1992** 3a. Date of Last Report **05/24/1994**
 4. FEI Number **65-0374243** Applied For
 Not Applicable

2. Principal Place of Business 2a. Mailing Address
 21 **15724 N. Dale Mabrey Hwy** 27 **327 Alexander Palm Rd**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 22 **MIAMI FL.** 27 **Boca Raton FL.**
 City & State City & State
 23 **33618** 29 **33432** 30 **Palm Bch**
 Zip Country Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**
 6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
 7. This corporation has liability for intangible tax under s. 100.052, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
KAYNE, STEPHAN M
3900 HOLLYWOOD BLVD
PHE
HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent
 81 Name **ROBERT L. BOK**
 82 Street Address (P.O. Box Number is Not Acceptable) **327 Alexander Palm Rd**
 83
 84 City **Boca Raton** FL 85 Zip Code **33432**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* DATE **4/8/95**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	BOK, ROBERT
STREET ADDRESS	1200 N FEDERAL HWY SUITE 305
CITY - ST - ZIP	BOCA RATON FL 33432
TITLE	D
NAME	BOK, DIANE
STREET ADDRESS	1200 N FEDERAL HWY SUITE 305
CITY - ST - ZIP	BOCA RATON FL 33432
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE **4/8/95** ANYONE FOR FEE? **1304**

CR2E034 (3/95)