FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 14 1997 8:00am

Secretary of State

A ROBERRO PAR PRINT TIRIT ROBER GOSTO GOTTO BUTTI D'ARRE 10010 ATARA TELES CASTO ATARA

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9200007633 (0)

FUN KIDS, INC.

SIGNATURE:

Principal Place 2750 WEST 68 SUITE 110 HALEAH FL 33 2. Principal Pl 21 Suite, Apt.	TH STREET	Mailing Address 2750 WEST 68TH STREET SUITE 110 HIALEAH FL 33018-5447	,				IJA OBIIL BURK JA	1949 #1499 (HIB)	0 (1)4 (16 0)
SUITE 110 HALEAH FL 33 2. Principat Pl Suite, Apt.	9016	SUITE 110	•						
2. Principal Pr		* - · · · ·							
2. Principal Pi		HALEAH PL 33U10-0447							
Suite, Apt.	lace of Business					3. Date Incorporated or Qualified 3a. Date of Last Report			
Suite, Apt.	lace of Business					11/24/1992		0/1996	
Suite, Apt.		2a. Mailing Address			·,· ·· · · · · · · · · · · · · · · · ·	4. FEI Number		Ap	plied For
		26	4			65-0375502	Not Applicable		
99	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	
		City & State						Fee Re	
City & State	е	28 City & State				6. Election Campaign Financing Trust Fund Contribution	П	\$5.00 Added t	
Zip	Country	Zip	Co	uniry		This corporation has liability for			
24	25	29	30	•		,] No	
	9. Name and Address of Curr					10. Name and Address of New R	egistered A	gent	
	Arza, Yolanda			81	Name				
2750 W. 68 ST., #110				82	Street Add	ress (P.O. Box Number is Not Acceptable)			
HIAL	LEAH FL 33016			20		10.40			
				83					
				84	City		FL	85 Zip (Code
44 Dissiport	to the provisions of Continue 607.0	602 and 607 1509. Florida Statu	tac tha	hove	-named co	rporation submits this statement for the		changing it	s registered
office or r	registered about or both, in the Sta	ite of Florida. Such change was	authoriza	ed by	the corpora	ation's board of directors. I hereby acc	ept the appo	intment as	registered
agent. I a	im familiar with, and accept the obl	ligations of, Section 607.0505, Fi	ionda Sti	atutes			2	-10-9	77
SIGNATURE	Signature, typed or printed name of Alfred	agent in title diapplicable (NO	TE: Register	ed Age	nt signature req	ulred when reinstating)	DATE		·
12.		ND DIRECTORS	13			ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTOR	
HILE	PD	☐ DELETE	1.1	TITLE				Change	Addition
NAMÉ	YGARZA, YOLANDA		1.2	NAME		•			
STREET ADDRESS	2750 W. 68 ST. #110		1.3	STREET	ADDRESS				
CITY-\$1-7IF	HIALEAH FL 33016	T Briefs		CITY-S	T-ZIP			Change	Addition
TITLE	STD NEDALLES CLOPIA	☐ DELETE		TITLE				[] Change	L.J. ADGIRION
NAME	MIRALLES, GLORIA 2750 W. 68 ST. #110			NAME OTREET	ADDRESS				•
STREET ADDRESS	HIALEAH FL 33016			CITY-5					
CITY - S1 - ZIP TITLE	TINDENT I C 000 IO	DELETE		TITLE	91~2IF			Change	Addition
NAME			- 1	NAME					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			3.4.	City-S	ST-21P				
TITLE		DELETE	4.1	TITLE				Change	Addition
NAME			4. 2	NAME					
STREET ADDRESS			4.3	STREET	ADDRESS				
CITY-ST-ZIP			4.4	CITY-\$	T-ZIP				
TITLE		☐ DELETE	5.1	TITLE	i			Change	Addition
NAME				NAME					
STREET ADDRESS			5.3	STREET	ADDRESS				
CITY-S1-ZIP		DELETE		CITY - S	T-ZIP			Change	Addition
TITLE		DELETE		TITLE				← Cusuge	L.J Addition
11010	1		6.2	NAME	ADDRESS				•
NAME			₽						
STREET ADDRESS					i				
STREET ADDRESS C(TY-ST-7)2	by certify that the information supri	olied with this filing does not gua	64 lify for th	City-S	r-zip	led in Section 119.07(3)(i), Florida Statu nat my signature shall have the same le	ites. I furthe	certify that	t the

ORIA MIRALLES