

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

Page 1 of 3

DOCUMENT # P93000010389 (3)

1. Corporation Name

CINDY'S KIDS, INC.



Principal Place of Business

315 ALAFAYA WOODS BLVD
OVIEDO FL 32765
US

Mailing Address

315 ALAFAYA WOODS BLVD
OVIEDO FL 32765
US

3. Date Incorporated or Qualified
02/03/1993

3a. Date of Last Report
04/28/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-3168838

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ZIMMERMANN, CINDY T
205 MAGNOLIA LAKE DR.
LONGWOOD FL 32779

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

727 BEAR CREEK CIRCLE

83

84

City WINTER SPRINGS,

FL

85 Zip Code

32708

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
P
ZIMMERMAN, CINDY T
727 BEAR CREEK CIRCLE
WINTER SPRINGS FL

☐ DELETE

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

☒ Change ☐ Addition

ZIMMERMANN, CINDY T

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
VPST
ZIMMERMAN, PETER W
727 BEAR CREEK CIRCLE
WINTER SPRING FL

☐ DELETE

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

☒ Change ☐ Addition

ZIMMERMANN, PETER W

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

☐ Change ☐ Addition

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]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/96 (407) 366-2100
Date Daytime Phone #

CR2E034 (12/95)

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Cindy's Kids, Inc.

d/b/a



**315 Alafaya Woods Blvd. — Oviedo, FL 32765
(407) 366-2100**

April 23, 1996

Ms. Sandra B. Mortham
Secretary of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Ms. Mortham:

In our 1995 Corporation Annual Report, we requested that the mailing address for our corporation's registered agent be changed and that the spelling of two of our corporate officers' names be corrected. These changes were not made by your staff. As a result, mail regarding legal matters was sent to our registered agent's old address and was delayed in being delivered. A copy of our 1995 Corporation Annual Report is attached for your information.

We request that the changes indicated in our 1996 Corporation Annual Report be made to correct this situation and that your staff contact us to confirm that these changes have been made.


Thank you for your attention to this matter.

Sincerely,

Peter Zimmermann

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CORPORATION ANNUAL REPORT 1995				FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P93000010389 (3)					
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DO NOT WRITE IN THIS SPACE.					
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24			3a. Date of Last Report 06/28/1994 3. Date Incorporated or Qualified 02/03/1993 4. FEI Number 59-3168838 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
9. Name and Address of Current Registered Agent ZIMMERMANN, CINDY T 205 MAGNOLIA LAKE DR. LONGWOOD FL 32779			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 727 BEAR CREEK CIRCLE 83 84 City WINTER SPRINGS, FL 85 Zip Code 32708		
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SIGNATURE: _____ DATE: _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
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