

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

CORPORATION ANNUAL REPORT 1995	 FLORIDA DEPARTMENT OF STATE Sandra B. Morton Secretary of State DIVISION OF CORPORATIONS
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APPROVED
AND
FILED

MAY 11 1994

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000054352 (8)**

1. Corporation Name

KIDS ON THE MOVE & MORE, INC.

Principal Place of Business

**MIAMI SHORES COMM CNT
9617 PARK DR
MIAMI SHORES FL 33138
US**

Mailing Address

**4450 N JEFFERSON AVE
MIAMI BEACH FL 33140**

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Reincorporation 08/03/1993	3a. Date of Last Report 04/22/1994
4. FEI Number 65-0427923	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. 190.032 Florida Statutes. ☐ Yes ☒ No	

2. Principal Office of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. County	29. County
25. City	30. City

9. Name and Address of Current Registered Agent

**SHAPIRO, BRIAN
4450 N JEFFERSON AVE
MIAMI BCH FL 33140**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83. City
84. City
FL 85. Zip Code

11. Pursuant to the provisions of Sections 607 (9)(c) 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 (9)(c) Florida Statutes.

SIGNATURE

(Signature of Current Registered Agent or Agent for Service)

(Signature of New Registered Agent or Agent for Service)

(Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 1994	
1. TITLE	VS SHAPIRO, BRIAN 4450 N JEFFERSON AVE MIAMI BCH FL	1.1 TITLE	☐ Change ☐ Addition
2. NAME	PT SHAPIRO, MICHAEL 4450 N. JEFFERSON AVE MIAMI BEACH FL	1.2 NAME	☐ Change ☐ Addition
3. STREET ADDRESS		1.3 STREET ADDRESS	☐ Change ☐ Addition
4. CITY & STATE		1.4 CITY & STATE	☐ Change ☐ Addition
5. TITLE		2.1 TITLE	☐ Change ☐ Addition
6. NAME		2.2 NAME	☐ Change ☐ Addition
7. STREET ADDRESS		2.3 STREET ADDRESS	☐ Change ☐ Addition
8. CITY & STATE		2.4 CITY & STATE	☐ Change ☐ Addition
9. TITLE		3.1 TITLE	☐ Change ☐ Addition
10. NAME		3.2 NAME	☐ Change ☐ Addition
11. STREET ADDRESS		3.3 STREET ADDRESS	☐ Change ☐ Addition
12. CITY & STATE		3.4 CITY & STATE	☐ Change ☐ Addition
13. TITLE		4.1 TITLE	☐ Change ☐ Addition
14. NAME		4.2 NAME	☐ Change ☐ Addition
15. STREET ADDRESS		4.3 STREET ADDRESS	☐ Change ☐ Addition
16. CITY & STATE		4.4 CITY & STATE	☐ Change ☐ Addition
17. TITLE		5.1 TITLE	☐ Change ☐ Addition
18. NAME		5.2 NAME	☐ Change ☐ Addition
19. STREET ADDRESS		5.3 STREET ADDRESS	☐ Change ☐ Addition
20. CITY & STATE		5.4 CITY & STATE	☐ Change ☐ Addition
21. TITLE		6.1 TITLE	☐ Change ☐ Addition
22. NAME		6.2 NAME	☐ Change ☐ Addition
23. STREET ADDRESS		6.3 STREET ADDRESS	☐ Change ☐ Addition
24. CITY & STATE		6.4 CITY & STATE	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.032(9)(a) Florida Statutes. I further certify that the information data used in 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 person or business empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if I am not an officer or director with an address.

SIGNATURE:

Michael Shapiro
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/94