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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000075222 (8)

HEAD START DEVELOPMENT CORP.

FILED Jan 27 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 9509 HARDING AVE 9509 HARDING AVE SURFSIDE FL 33154 SURFSIDE FL 33154 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/01/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0445593 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zìp Country 8. This corporation owes or has paid the current year intangible 25 30 ☐ Yes 24 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CASTILLO B. ALVARO ESQ SCHMACHTENBERG & CASTILLO Street Address (P.O. Box Number is Not Acceptable) 1533 SUNSET DR SUITE 201 83 MIAMI FL 33143 City 85 Zip Code 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. gistered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change TITLE DELETE 1.1 TITLE Addition PATAKY, ERNESTO NAME 1.2 NAME E034 9509 HARDING AVE 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33154 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE NAME BALKACHUK, PHILLIP 2.2 NAME 9509 HARDING AVE STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33154 CITY - ST - ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE BIGELMAN, ANITA NAME 3.2 NAME 9509 HARDING AVE STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL 33154 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change ___ Addition TITLE 4.1 TITLE SRAGOWICZ, RAQUEL 4 2 NAME NAME 9509 HARDING AVE STREET ADDRESS 4.3 STREET ADDRESS MIAMI FL 33154 CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE BAKALCHUK, LEE NAME 5.2 NAME 9509 HARDING AVE STREET ADDRESS 5.3 STREET ADDRESS **MIAMI FL 33154** CITY-ST-ZIP 5.4 CITY - ST - ZIP _ DELETE Change TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIF CITY-ST-ZIP

1. I hereby certily that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida 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 charged, or on an attachment with an address.

SIGNATURE: - DAJUIL NEWSON SECRETARY 1_14_1998 (305) 865-9811