		<del> </del>
FILE NOW: FI	LING FEE AFTER MAY 1 IS \$225.00	
PROFIT CORPORATION ANNUAL REPORT 1996	FLORIDA DEPARTMENT OF STATE  Sandra B. Mortham  Secretary of State  DIVISION OF CORPURATIONS	
DOCUMENT #	P94000017624 (5)	
PARADISE DAYCAR	E CENTER, INC.	
Principal Place of Business	Mailing Address	
3488 NW 25TH STREET	3488 NW 25TH STREET	

PARADISE DAYCARE CENTER, INC.							
Principal Place of	of Business	Mailing Address			1 f##timat eta satut aran antsu an	48:01 <b>49:</b> 17 ()	an iadia diiia iiqi albi ibai
3488 NW 25TH STREET 3		3488 NW 25TH S LAUDERDALE LA					
					<ol> <li>Date Incorporated or Qualified 03/07/1994</li> </ol>		e of Last Report 5/01/1995
2. Principal Plac	oe of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			65-0475044		Not Applicable \$8.75 Additional
Suite, Apt. #	, etc.	Suite, Apt. #, el	ic.		<ol><li>Certificate of Status Desired</li></ol>		Fee Required
City & State		27 Crty & State			6. Election Campaign Financing		\$5.00 May Be
23		28			Trust Fund Contribution		Added to Fees
Zip	Country	Zip	Cou	ntry	8. This corporation has liability for	r intangible t	ax under s 199.032,
24	25	29	30		Florida Statutes Ye  10, Name and Address of New	S No	Agent
	9. Name and Address of Curre	ent Registered Agent		O1 Near			Agent
•				81 Name	HN SPENCE		
	, althea			82 Street Ac	HN SPENCE Idress (P.O. Box Number is Not Accept 488 N. W 25	abie	
	v 25th Street			83	488 N. W as		
LAUDER	DALE LAKES FL 33311			63			
				84 City	UDERDALE LAK	ES FL	85 Zip Code
25	40.00	000 1007 #100 Flor do l	Statutes the abo		the state of the s	unage of ot	position its registered office
11. Paraciant to	o the provisions of Sections 607.050 art agent, or both, in the State of Flo	i02 and 607.1508, Nonda orida: Such change was at	statutes, the abc ithorized by the o	corporation's b	poration submits this statement for the poard of directors. I hereby accept the ap	pointment a	s registered agent. Lam
familiar wit	h, and accept the obligations of Se	ection 607,0505, Florida St	atutes.		,	1//	196
SIGNATURE		Car Car	1.76 W .1077		uliced vitario removatingh	7-/ /_/ DA <b>J</b>	
	Signal, let typed or printed name of register a au	AND DIRECTORS	(1.01E HE GISTORIE)	Ager ( signarure res)	ADDITIONS/CHANGES TO O	FFICERS AN	ID DIRECTORS IN 12
12.	D	DELET		ITEE	DIRECTOR		☐ Change X Addition
TITLE	SPENCE, ALTHEA	4	1.2 N	AME	JOHN SPENCE 3311 N.W. 291		
NAME GERELL LODGES	3488 NW 25TH STREET			IREEL ADDRESS	2311 N.W. 291	L 57.	
STREET ADDRESS	LAUDERDALE LAKES FL			17Y-ST-ZIP	LAUDERDALE	LALE	S P133311
CITY-ST-ZIP TITLE	DAODERDALE DIALEO 1 E	☐ DELF1					☐ Change ☐ Addition
			22 N	AME			
NAME CTREET ADDRESS				TREET ADORESS			
STREET ADDRESS				ITY-ST-ZIP			
CITY - ST - ZF2		DELE1					Change - Addition
NAME			321	IAMÉ			. <del>.</del>
STREET ADDRESS			33:	STREET ADDRESS		.,-	
CITY-ST-ZIP				ITY - ST - ZIF			
TITLE		☐ DELF	l£. 4 1	TITLE	7-		☐ Change ☐ Addition
NAME				IAME	(		
STREET ADDRESS			433	STREET ADDRESS			
CITY-ST-ZP				CHY-S1-ZIP			Change Addition
TITLE		☐ DELE	TE 5 1	TITLE			Change Addition
NAME				NAME			
STREET ADDRESS			53	STREET ADDRESS			
CITY - ST - ZIP				CITY - ST - ZIP			- Change Addition
THILE		☐ DELE		TITLE .	000001	7773	330
NAME				NAME TO THE T	-04/11/960	1103	033
STREET AD DRESS				STREET AUDRESS	0000017 -04/11/960 ***200.00		4-11-96
CITY - ST - ZIP			64	CITY - ST - ZIP	life for the exemption stated in Section :		

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 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 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 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 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 samular report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this samular report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this samular report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this samular report is true and accurate and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this samular report is true and accurate and accurate and accurate and that my signature shall have the same legal effect as if made under certificities and accurate and