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

Mailing Address 4444 STILL DIVID AVE

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 03 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400020023 (5)

IT'S A KIDS WORLD INC.

Principal Place of Business

4444 CTIL BIVIE AVE

CITY - ST - ZIP

FRUITLAND PARK FL 34731 US			FRUITLAND PARK FL 34731 US						
						3. Date Incorporated or Qualified 03/11/1994		te of Last 1/1996	Report
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number			Applied For
21		26				59-3233606			Not Applicable
Suite, Apt. # 22	i, elc	Suite, Apt. #, etc.	 			5. Certificate of Status Desired			Additional Required
City & State		City & State				Election Campaign Financing Trust Fund Contribution		\$5.0	May Be
23 Zip	Country	28 Zip	Cou	ntre		·····			· · · · · · · · · · · · · · · · · · ·
24	25	29	30			8. This corporation has liability for in Florida Statutes	intangible Yes [r s. 199.032,
24	9. Name and Address of Cu		30			10. Name and Address of New Re		-	
CHEV	alier, miriam r			81	Name	To, Harro dila Hadisəb of Holi Flo	8.0.0.00	,90	
	MARILYN STREET				fress (P.O. Box Number is Not Acceptable)				
FRUIT	LAND PARK FL 34731			83	-				······································
					Oh.			Top 1 7	n Onda
				B4	City		FL	85 Zi	p Code
l office or r∈	egistered agent, or both, in the S	.0502 and 607 1508, Florida Statul State of Florida. Such change was bligations of, Section 607.0505, Fl	authorized	d by	the corpor	rporation submits this statement for the patients acceptation's board of directors. I hereby acceptations	ourpose of the appo	changing pintment	g its registered as registered
	Signal ine, typed or proted name of registers	d agent and title if applicable (NO)	E Registere	d Age	nt signature req	ured when reinstating)	DATE		
12.		AND DIRECTORS	13.	·····		ADDITIONS/CHANGES TO OFFIC			
	D	☐ DELETE		1.1 TITLE				Chang	e 🔲 Addition
	CHEVALIER, MIRIAM R		1.2 N/	AME	1				
	1101 MARILYN ST.		1.3 STREET ADDRESS		ADDRESS				
	FRUITLAND PARK FL		1.4 C(TY-\$	T-ZIP				
	\$	☐ DELETE	☐ DELETE 2.1 T					Chang	e Addition
	CHEVALIER, KERRY L		2.2 N/	ME	1	•			
	1101 MARILYN ST.		2.3 \$1	2.3 STREET ADDRESS					
CiTY+S1+ZiP	FRUITLAND PARK FL		2.40	ITY-S	T-ZIP				
TITLE		DELETE	3.1 []	TLE				Chang	e Addition
NAME			3.2 N/	ME		•			
STREET ADDRESS			3.3 \$1	REET	ADDRESS				
CHY+ST-ZIP			3.4. C	ITY-S	1-ZIP				
TITLE		DELETE	4.1 Ti	TLE				Chang	e 🔲 Addition
NAME			4.2 N	AME					
STREET ADDRESS			4.3 \$1	REET	ADDRESS				
C/TY-ST-ZIP			4.4 CI	TY-S	T - ZIP				
TITLE		☐ DELETE	5.1 TI	TLE				Chang	e
NAME			5.2 N/	AME					
STREET ADDRESS			5.3 \$1	REET	ADDRESS				
CHY-S7-ZIP			5.4 C	TY-S	T - ZIP				
TITLE	***************************************	DELETE	61 TI	ītE				Chang	e Addition
NAME			6.2 N/	\ME					
STREET ADDRESS			6.3 ST	REET	ADDRESS				

6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 chapted, or on an attachment with an address.