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PROFIT CORPORATION ANNUAL REPORT

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

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**CS & KIDS INCORPORATED** Principal Place of Business Mailing Address 3056 S. STATE RD. 7. #48 3056 S. STATE RD. 7. #48 MIRAMAR FL 33023 MIRAMAR FL 33023 3a. Date of Last Report 3. Date Incorporated or Qualified 08/17/1994 05/01/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0515106 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zφ Country 8. This corporation has liability for intangible tax under s. 199.032, 24 29 Florida Statutes Yes No 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent WALDERA, CHRISTOPHER B 82 1225 SE 2ND AVE. 83 FT. LAUDERDALE FL 33316 **mke** ons 607.0502 and 607.1508. Florida Statutes, the above named corporation submits this statement for the pulpose of changing its registered office. State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Tam attorns of, Section 601.0505, Florida Statutes. 11. Pursuant or real: SIGNA OFFICE AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE TITLE PDT 1 1 TiTLE Change Philipp, PHILLIP, CHARLES NAME 1.2 NAME STREET ADDRESS 630 SW 66TH TER 1.3 STREET ADDRESS CITY-ST-ZIP PEMBROKE PINES FL 33023 1.4 C+TY - ST - ZIP Change TITLE DELETE 2 1 TITLE Addition Philipp, ShellA PHILLIP, SHEILA NAME 2.2 NAME 630 SW 66TH TER STHEET ADDRESS 2.3 STREET ADDRESS PEMBROKE PINES FL 33023 CITY - ST - ZIP 2.4 CITY - ST - ZIP DELETE TIFLE Change Addition 3 1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3. STREET ADDRESS CITY-ST-ZIP 3.4 CITY - ST - ZiP TITLE □ DELETE 4 1 TITLE Change ☐ Addition NAME STREET ADDRESS 4.3 STHEET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP THLE □ DELETE Change 5 1 TITLE Addit on 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY - ST - ZIP DELETE THLE 6 1 THELE Change Addition | NAME 6.2 NAME STREET ADDRESS **6.3 STHEET ADDRESS** CITY - ST - ZIP 64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this firing 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 percent on this area is reported annual record is true and accurate and that my signature shall have the same legal affect as if made under

supplemental annual report is true and accurate and that my signature shall have the same legal offect as if made under receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name