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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000047660 (2)

SMART START, A LEARNING STORE, INC. Principal Place of Business Mailing Address 2526 W BRANDON BLVD 2526 W BRANDON BLVD BRANDON FL 33511 BRANDON FL 33511 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualified 06/15/1995 2a. Mailing Address 4. FEI Number Applied For above 26 65-0586248 Not Applicable 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 П 23 28 Trust Fund Contribution Added to Fees Country Zip Country Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name MANN, ARTHUR L 911 SYMPHONY BEACH LANE 82 Street Address (P.O. Box Number is Not Acceptable) APOLLO BEACH FL 33572 83 City Zip Code 85 ection 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered of the obligations of, Section 607.0505, Florida Statutes. 11. Pursuant to the office or registe SIGNATURE (NOTE: Registered Agent signature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TETLE 1.1 TITLE NAME MANN, ARTHUR L 1.2 NAME 911 SYMPHONY BEACH LANE STREET ADDRESS 1.3 STREET ADDRESS APOLLO BEACH FL 33572 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TATLE 2.1 TITLE 22 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME

64.CITY-ST-ZIP

14. I 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 supplied intal 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 of the c

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STREET ADDRESS

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4.3 STREET ADDRESS

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5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

3-10.98

FILED

Mar 17 1998 8:00am

Secretary of State

B13-641-14

Addition

Addition

☐ Change

Change