

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Jan 29 1997 8:00am
Secretary of State

DOCUMENT # P95000054108 (2)

1. Corporation Name
BRIGHT KIDS ACADEMY, INC.

Principal Place of Business
210 NORTHEAST 18TH STREET
MIAMI FL 33132

Mailing Address
210 NORTHEAST 18TH STREET
MIAMI FL 33132-1118

3. Date Incorporated or Qualified 07/13/1995
3a. Date of Last Report 07/08/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number 95-0596100	Applied For ☐ Not Applicable
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
22. City & State	27. City & State	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
23. Zip	28. Zip	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	
24. Country	29. Country		

9. Name and Address of Current Registered Agent REKSODIHARDJO, EVIE SOEGENG 210 BE 18TH ST CORAL GABLES FL 33134	10. Name and Address of New Registered Agent 81. Name Reksodihardjo, Evie S. 82. Street Address (P.O. Box Number is Not Acceptable) 83. 210 Northeast 18th Street 84. City Miami 85. Zip Code FL 33132
---	--

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.

SIGNATURE: *Evie S. Reksodihardjo* Evie S. Reksodihardjo, President 1/21/97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD REKSODIHARDJO, EVIE	1.1 TITLE	☐ Change ☐ Addition
NAME	210 NORTHEAST 18TH STREET	1.2 NAME	
STREET ADDRESS	MIAMI FL 33132	1.3 STREET ADDRESS	
CITY - ST - ZIP		1.4 CITY - ST - ZIP	
TITLE	VSD	2.1 TITLE	☐ Change ☐ Addition
NAME	MARTIN, LUISA	2.2 NAME	
STREET ADDRESS	210 NORTHEAST 18TH STREET	2.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33132	2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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 changed, or on an attachment with an address

SIGNATURE: *Evie S. Reksodihardjo* Evie S. Reksodihardjo, President (305) 373-0009
1/21/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)