SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



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

1996

P95000090577 (4) **DOCUMENT #**

CHILD HOUSE	COECUL CENTER	INC:	

CHILDHOOD SPEECH CENTER, INC Mailing Address Principal Place of Business 7840 S.W. 131ST AVENUE MIAMI FL 33183-4261 7840 S.W. 131ST AVENUE MIAMI FL 33183-4261 3. Date Incorporated or Qualified 3a. Date of Last Fleport 11/27/1995 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business 65-0626824 Not Applicable 26 \$8.75 Additional 21 Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required Suite. Apt. #, etc. 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 B. This corporation has liability for intangible tax under s. 199 032 23 Country Ζıρ Country Žιρ Yes 🔲 No Florida Statutes 30 29 25 Name and Address of New Registered Agent 24 9. Name and Address of Current Registered Agent 61 Name GUZMAN, ALEJANDRO Street Address (P.O. Box Number is Not Acceptable) 82 7840 S.W. 131ST AVENUE MIAMI FL 33183-4261 83 Zip Code 84 City 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. Thereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE Registored Agent signature required when reinstating) SIGNATURE Signature it (see for product to one of respectived agent and title it approaches ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. Change Addition 12. DELETE 11100 CR2E034 TITLE 1.2 NAME GUZMAN, VICTORIA RITT NAME 1.3 STREET ADDRESS 7840 S.W. 131ST AVENUE STREET ADDRESS 1.4 CITY - ST - ZIP MIAMI FL 33183-4261 Change Addition CITY-ST-ZIP DELETE 21 THILE TITLE 2.2 NAME NAME 2 3 STREET ADDRESS STREET ADDRESS 2 4 City - ST - ZIP Change Addition DITY - ST - ZIF DELETE 3.5 1/100 TITLE 3.2 NAME NAME 33 STREET ADDRESS STREET ADDRESS 34 CITY - ST - ZIP Change Addition CITY-ST-ZIP DELETE 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP Change ____ Addition CITY - ST - ZIP DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP Change Addition CITY - ST - ZIP DELETE 6.1 TITLE TITLE NAME 6.3 STREET ADDRESS STREET ADDRESS 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119 07(3)(k), Florida Statutes 1 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 logal 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 617, Florida Statutes, and that my name concerns in Fight 4.2 or filest 13 of second or fine a statished with an address. 6 4 CITY - \$1 - ZiP

that my name appears in

4/26/94 305-387-2187