

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000091408

Entity Name: THE KID MOVER, INC.

FILED  
Jul 11, 2007  
Secretary of State

## Current Principal Place of Business:

P.O. BOX 610278  
MIAMI, FL 33261

## New Principal Place of Business:

2800 BISCAYNE BLVD.  
SUITE 888  
MIAMI, FL 33137

## Current Mailing Address:

P.O. BOX 610278  
MIAMI, FL 33261

## New Mailing Address:

FEI Number: 65-0631531

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORTES, FERNANDO JR  
2800 BISCAYNE BLVD.  
SUITE 888  
MIAMI, FL 33137 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DVPS ( ) Delete  
Name: CORTES, FERANDO JR  
Address: 2800 BISCAYNE BLVD.  
City-St-Zip: MIAMI, FL 33137

Title: DPT ( ) Delete  
Name: CORTES, STEPHANIE  
Address: 2800 BISCAYNE BLVD.  
City-St-Zip: MIAMI, FL 33137

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition  
Name: CORTES, FERANDO JR  
Address: 2800 BISCAYNE BLVD.  
City-St-Zip: MIAMI, FL 33137

Title: DVPS (X) Change ( ) Addition  
Name: CORTES, STEPHANIE  
Address: 2800 BISCAYNE BLVD.  
City-St-Zip: MIAMI, FL 33137

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHANIE CORTES

DVPS

07/11/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date