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

CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED Mar 17 1997 8:00am Secretary of State

. 1	AL REPORT 1 997		DIVISION OF	tary of State CORPORA		Secretar	J		
DOCUMENT # P96000025159 (0) 1. Corporation Name KIDVID, INC.									
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Principal Piace	of Business	N	Mailing Address			— I DATHEAT NO IONIA CINIL COMI BANT AI	EUR BAND KOAL A	16110 10011 1011	E SENTE COOL
1801 COLLINS AVE.			1801 COLLINS AVE.						
SUITE 442 MIAMI BEACH FI	1 33139		uite 442 Iiami Beach Fl 33139	7414					
					3. Date Incorporated or Qualified 03/21/1996	3a. Date	e of Last R	eport	
2. Principal Pla	ace of Business	26	. Mailing Address			4. FEI Number			plied For
21		26	<i>C</i> A			65-067314	6		ot Applicable
Suite, Apt. #	r. etc	27	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 . Fee Re	
City & State	1 A1		City & State			6. Election Campaign Financing	 	\$5.00	
23		28		 _		Trust Fund Contribution		Added	
<i>7₁</i> p 	Countr	·	Zip 1	Cour	atry	8. This corporation has liability for			. 199.032,
24	25 9 Name and Addre	ss of Current Regi	stered Agent	30	· · · · · · · · · · · · · · · · · · ·	Florida Statutes 10, Name and Address of New I	Yes E		
IOGR	OSKY, MICHAEL			··	81 Name	10. 100110 1110110			
	SEVILLA AVE.			+	B2 Street Add	ress (P.O. Box Number is Not Accept	able)		
#305				l'	311861 AUG	areas (r.o. box Number is Not Accept	aulej		
^^-	AL GABLES FL 3313	4		[3	83				
COR	AT ONDIES LE 3313	•							
COR	AL DADEES EL 3313	•		-	84 City			85 Zip	Code
	•		607.1508, Florida Stat	1	1	poration submits this statement for the	FL purpose of o		
11, Pursuant to office or re agent I an	•		607.1508, Florida Statida Such change wa of, Section 607.0505,	1	1	poration submits this statement for the ation's board of directors. I hereby acc			
11. Pursuant to office or reagent I an SIGNATURE	o the provisions of Sec gistered agent, or both in familiar with, and acc signatur, tyard or printed hari	ions 607,0502 and t , in the State of Flor ept the obligations of of registered agent and till	te if applicable (N	utes, the ab s authorized Florida Statu OIE Registered	ove-named corporal by the corporal ites.	ured when reinstating)	purpose of a cept the appo	changing it intment as	s registered registered
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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.