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 # P96000038288 (2)

TRAVELIN' BABY, INCORPORATED

Principal Place of Business

Mailing Address

FILED May 01 1998 8:00am Secretary of State



801 SOUTH FEDERAL HIGHWAY #201 901 SOUTH FEDERAL HIGHWAY #201 FORT LAUDERDALE FL 33316 FORT LAUDERDALE FL 33316 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/29/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0662966 21 Not Applicable 26 Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country $Z_{\rm IP}$ This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. ☐ Yes 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name WHIDDON, CATHERINE 901 SOUTH FEDERAL HIGHWAY #201 82 Street Address (P.O. Box Number is Not Acceptable) FORT LAUDERDALE FL 33316 83 84 City Zip Code 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** Signature, typed or printed hame of registered agent and pile if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE WHIDDON, CATHERINE NAME 1.2 NAME 901 SOUTH FEDERAL HIGHWAY #201 STREET ADDRESS 1.3 STREET ADDRESS FORT LAUDERDALE FL 33316 14 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE **BELLOWS**, KAREN 2.2 NAME NAME 1622 EAST LAKE DRIVE STREET ADDRESS 2.3 STREET ADDRESS **FORT LAUDERDALE FL 33316** CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.11|1|1| WHIDDON, GENE A NAME 3.2 NAME 901 SOUTH FEDERAL HIGHWAY #201 STREET ADDRESS 3.3 STREET ADDRESS FORT LAUDERDALE FL 33316 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 THILE **BELLOWS, GREGORY** NAME 4. 2 NAME **1822 EAST LAKE DRIVE** STREET ADDRESS 4.3 STREET ADDRESS FORT LAUDERDALE FL 33316 CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 JULE LEVIT. ROBERT H NAME **5.2 NAME** 901 SOUTHERN OAK LANE STREET ADDRESS 5.3 STREET ADDRESS APOPKA FL 32712 CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIF CITY-ST-ZIP

14. Thereby 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.

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4/23/98

954-766-9994