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

PROFIT CORPORATION ANNUAL REPORT

1007



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUI 1. Corporation KIDS I.D	11 7 44110	0061998 (6)			
Principal Place	e of Business	Mailing Address		E REBRIADA NO 18410 DINI ODNIK PERIK DENIK DENIK DENIK BINEF FIDIO 19110 CONFI ADIK 1881	
6251 NW 170 TERR MIAMI FL 33055		5251 NW 170 TERR MIAMI FL 33055-4059			
				3. Date Incorporated or Qualified 3a. Date of Last Report 07/24/1996	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number   Applied For   Not Applied For   Not Applied For	
21 Suite, Apt	# etc	Suite, Apt. #, etc.		- \$8.75 Additional	)le
22		27		5. Certificate of Status Desired Fee Required	
City & State	θ	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country	8. This corporation has liability for intangible tax under s. 199.032,	
24	25	29 30	1	Florida Statutes Yes No	_
	9. Name and Address of Currer	n Hegistered Agent	81 Name	10. Name and Address of New Registered Agent	$\dashv$
	RIGUEZ, ANABELL				
5251 NW 170 TERR MIAMI FL 33055			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
MIMMI PE 33033			83		
			84 City	<b>■■ 85</b> Zip Code	
				FL	
11. Pursuant office or r agent. I a	to the provisions of Sections 607,050 egistered agent, or both, in the State in familiar with, and accept the oblig	2 and 607.1508, Florida Statutes, of Florida. Such change was authations of, Section 607.0505, Florida	the above-named cor forized by the corpora a Statutes.	poration submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered	id
SIGNATURE					
10	Signature, typed or printed name of registered agr OFFICERS AN		rgistered Agent signature requ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.	PD	DELETE	11 TIGE	Change Additions	on
NAME	TORRES, LUZ		1.2 NAME	<b>5 5</b>	Ì
STREET ADDRESS	5361 NW 170 TERR		1.3 STREET ADDRESS		
CITY-\$1-ZIP	MIAMI FL 33055		1.4 CITY-ST-ZIP		
TITLE	VSTD	☐ DELETE	2.1 TITLE	Change Addite	on
NAME	RODRIGUEZ, ANABELL		2.2 NAME		
STREET ADDRESS	5251 NW 170 TERR		2.3 STREET ADDRESS		ļ
CITY-ST-ZIP TITLE	MIAMI FL 33055	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE	Change Addili	ion
NAME		C Section	3.2 NAME		•
STREET ADDRESS		·	3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-7/P		- 1
TITLE		DELETE	4 1 TITLE	Change Additi	on.
NAME			4. 2 NAME		
STREET ADDRESS			4.3 \$TREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY - S1 - 7IP	☐ Change ☐ Additi	an l
TITLE     NAME		F"] DETERT	5.1 TITLE 5.2 NAME	La Change La Agon	On
STREET ADDRESS			5.2 WANTE 5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELF1E	6.1 1111.6	Change Addili	on
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		Ì
CITY-ST-ZIP			6.4 CITY - ST - ZIP		J

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 of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 oranged, or on an attachment with an address.

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/11/97

**FILED** 

Apr 25 1997 8:00am

Secretary of State