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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #
1. Corporation Name

P96000076028 (5)

KIDS INSTANTRESPONSE DATABASE SYSTEMS, INC.

FILED May 06 1998 8:00am Secretary of State



Principal Place of E 1335 JOURNEY'S JACKSONVILLE FL 2. Principal Place of 21 Suite, Apt. #, etc.	END LANE	Mailing Address 1335 JOURNEY JACKSONVILLE	'S END LANE		
JACKSONVILLE FL 2. Principal Place of					
2. Principal Place o	F A566A	AUCKAOMAILLE	IL JECES		
21					DO NOT WRITE IN THIS SPACE
21					3. Date Incorporated or Qualified 09/05/1996
	of Business	2a. Mailing Addr	es s		4. FEI Number Applied For
Suite, Apt. #, etc		26			59-3401436 Not Applicab
22	C.	Suite, Apt. #,	etc.		5. Certificate of Status Desired See Required Fee Required
City & State		City & State			Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	ntry	This corporation owes or has paid the current year Intangible
24	25	29	30		Personal Property Tax due June 30. Yes No
	Name and Address of Current	Registered Agent		81 Name	10. Name and Address of New Registered Agent
	H, EDWARD A JR.			81 Name	10
1335 JOURNEY'S END LANE JACKSONVILLE FL 32223					et Address (P.O. Box Number is Not Acceptable)
			}	83	
				84 City	FL 85 Zip Code
SIGNATURE /	e provisions of Suctions 607.0502 erod agent, or both, in the State of militar with, and accept the obliga ture, lyped or prailed name of registered agen	M			ed corporation submits this statement for the purpose of changing its registered orporation's board of directors. I hereby accept the appointment as registered
12.	OFFICERS AND		13.	Agen signator	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE			LETE 1.1 TO	L£	☐ Change ☐ Addition
1	WESCH, EDWARD A JR.		1.2 NA		
	1335 JOURNEY'S END LANE			reet address	ss l
	JACKSONVILLE FL 32223		1	TY-ST-ZIP	
TITLE	D	☐ DE			Change Addition
NAME V	Wesch, Velora P		2.2 NA	ME	
	1335 JOURNEY'S END LANE		2.3 ST	REE1 ADDRESS	ss ·
CITY-ST-ZIP J	JACKSONVILLE FL 32223		2.4 C	TY-ST-ZIP	
TITLE		☐ DE	LETE 3.1 TH	LE	Change Addition
	REECE, THOMAS D	_	3.2 NA	ME	
	1750 KALAKAUA AVE., SUITE	3228	3.3 ST	REET ADDRESS	s
CITY-ST-ZIP	HONOLULU HI 96826			TY-ST-ZIP	
TITLE		☐ DE	LETE 41 TIT	LE	☐ Change ☐ Addition
NAME			4.2 N	AME	
STREET ADDRESS			4.3 ST	REET ADDRESS	
CITY-ST-ZIP				TY - ST - ZIP	
TITLE		L. DE	ELETE 5.1 TIT		Change Addition
NAME			5.2 NA		
STREET ADDRESS				REET ADDRESS	S
CITY-ST-ZIP		n n		Y-ST-ZIP	Towns There
TITLE		∐ D€	1		LJ Change L Additio
NAME			6.2 NA		
STREET ADDRESS				REET ADDRESS	SS
CITY-ST-ZIP	that the information supplied wit	th this filing does not		TY-ST-ZIP	ated in Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated on th	nis annual report or ∡upplemental	annual report is true	and accurate and	that my sid	also in Section 113.07(3)(i), florida Statutes. Further certify that the information signature shall have the same legal effect as if made under oath; that I am an as required by Chapter 607, Florida Statutes; and that my name appears in