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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



FLORIDA DEPARTMENT OF STATE

FILED

May 08 1997 8:00am

Secretary of State

Şandra B. Mortham

Secretary of State
Division OF CORPORATIONS

DOCUMENT # P96000084319 (8)

CANDY HOUSE SCHOOL AND DAYCARE CENTER, INC. Principal Place of Business Mailing Address 1628 NW 6 STREET 1628 NW 6 STREET MIAMI FL 33125 MIAMI FL 33125-4610 3. Date Incorporated or Qualified 3a. Date of Last Report 10/08/1996 2. Findcipal Place of Business 2a. Mailing Address Applied For 65-0708D30 21 26 Not Applicable Suite Apr. #. etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 23 28 Trust Fund Contribution Country Country 8. This corporation has liability for intengible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 ELIAS, MARIA A 1628 NW 6 STREET 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33125 83 84 City 85 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 13. (96/6) DELETE REGIDENT Addition Change Tille 11 TITLE CAZARO EUAS 1.2 NAME BVA HTES WINGSOI 1.3 STREET ADDRESS STREET ADDRESS MIAMI, FL 33125 OTTY - \$1 - 20 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE Ditt 2.2 NAME NAMI 23 STREET ADDRESS STREET ADORESS 2. 4 CITY - ST-ZIP DELETE Change Addition THE 3 1 YIJ/F NAMI 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. C/TY-ST-ZIP CITY - ST - ZIE DELETE Change Addition 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CHTY+ST-Zip 4.4 CITY-ST-ZIP DELETE Change Addition 2011 5 1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CHY-SI-ZIP DELETE Change Addition Tilte 6.1 TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CITY-ST-ZIP 14. Ldb 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 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 chapted, or only in attachment with an address.