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

Mailing Address
923 26TH STREET WEST

BRADENTON FL 34205-4046

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

923 26TH STREET WEST

**BRADENTON FL 34205** 



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 24 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000090438 (8)

SUNNYSIDE CHILD CARE CENTER, INC.

							-	3. Date Incorporated or Qualified 3a. Date of Last Report 11/01/1996				
<b>a b b c c c c c c c c c c</b>			Da Mailie	De Multipo Addroca				4. FEI Number		IAn	nlind Enr	
2. Principal Pl	ace or Busin	088		2a. Mailing Address			ŀ	65-0714679				
21	<u> </u>		26 Cuito					65-0117617		····		
Suite, Apt	#, etc		27	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required				
City & State	)		City 8	City & State				6. Election Campaign Financing		\$5.00	May Be	
23			28	28				Trust Fund Contribution				
Zip	Country Zip Co					8. This corporation has liability for intangible tax under s. 199.032,						
24	25 29 30						Florida Statutes					
9. Name and Address of Current Registered Agent								10. Name and Address of New Registered Agent				
DABEK, INGRID												
923 26TH STREET WEST BRADENTON FL 34205						82 Street Address (P.O. Box Number is Not Acceptable)						
						Silver rigid 55 (1. O. Dox Harrison is 1401 ricooptains)						
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						<u> </u>				1 1		
					84	City			FL	<b>85</b> Zip (	Code	
44 Durament		ens of Contions 60	2 05 02 and 607 450	IR Elorida Statut	os the abov	o named	corno	ration submits this statement for the	ournose of	changing it	s registered	
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. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.												
7 . 2 . 1/ / / / / / / / / / / / / / / / / /												
SIGNATURE	Signal instruction	for printed name of registe	er agent and life if applic	able (NOT	E: Registered Ag	ent signature	e required	when reinstating)	DATE/			
12.	-(f	ÖFFICER	S AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFIC	CERS AND	DIRECTOR	S IN 12	
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NAME					6.2 NAME							
STREET ADDRESS					6.3 STREE	T ADDRESS						
CITY - ST - ZIP					6.4 CITY							
14. I do here	Lby certify tha	at the information si	upplied with this filin	g does not quali	ify for the ex	emption s	stated i	in Section 119.07(3)(i), Florida Statut	es. 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.												