

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

FILED
May 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # p96000098647
 1. Corporation Name
MY KIDS WHOLESale, INC.

Principal Place of Business 7240 NW 25TH STREET MIAMI FL 33122	Mailing Address 7240 NW 25TH STREET MIAMI, FL 33122
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21 2. Principal Place of Business	2a. Mailing Address
22 Suite, Apt #, etc	26 State, Apt #, etc.
23 City & State	27 City & State
24 Zip	28 Country
25	29

DO NOT WRITE IN THESE SPACES

3. Date Incorporated or Qualified
12/04/1996

4. FEI Number
65-0717034

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Proportion Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 Yes No

9. Name and Address of Current Registered Agent

MORA, YECID D.
2068 SW 138TH COURT
MIAMI, FL 33175

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

85 Zip Code

FL

I, 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.

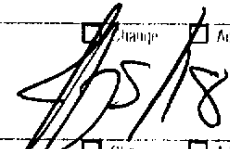
SIGNATURE _____ (NOTE: Registered Agent signature required when registering.)

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	YECID D. MORA	
STREET ADDRESS	2068 SW 138TH COURT	
CITY- ST- ZIP	MIAMI, FL 33175	
TITLE	S	<input type="checkbox"/> DELETE
NAME	MARIA MORA	
STREET ADDRESS	2068 SW 138TH COURT	
CITY- ST- ZIP	MIAMI, FL 33175	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
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CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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*****150.00**

14. I 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. 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 in an attachment with an address.

SIGNATURE:  **MARIA MORA** **04/27/1998 (305) 227-4120**

CR2E034 (10/97)