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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthám

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P9700003631 (3)

NOT FOR KIDS ONLY, INC.

Principal Place of Business

7750 SW 124TH ST MIAMI FL 33156 Mailing Address

7750 SW 124TH ST MIAMI FL 33158

FILED May 21 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

							rporated or Qualified	1			
A B	Committee of the commit	l Do Living Addison				01/14/1					
	lace of Business	28. Mailing Address				4. FEI Numb	er		<u> </u>	oplied For	
21 Cuito Ant	# ato	[26]								ot Applicable	
Suite, Apt.		Suite, Apt. #, etc.				5. Certificate	of Status Desired			Additional equired	
City & State	9	City & State				6. Election C	ampaign Financing	_	\$5.00	May Be	
23		28				Trust Fund Contribution Added to Fees					
Zip	Country	Zφ	├ ─¬	untry			oration owes or has p				
24	25	29	30			Personal Property Tax due June 30. Yes XNo					
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent						
Josepher, Gloria Roa					81 Name						
2100 PONCE DE LOEN BLVD				82	Street Addres	ress (P.O. Box Number is Not Acceptable)					
SUI						- 1					
CORAL GABLES FL 33134				83							
,				84	City			FL	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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.											
SIGNATURE	Signature Typed or pooleo name of registered age	ot and to elif applicable	(NOTE Registers	d Agent	signature required	when reinstating)		DATE			
12.	OFFICERS AN		13.				S/CHANGES TO OFF	ICERS AND	DIRECTOR	RS IN 2	
TITLE	VSD		DELETE 1.1.1	ITLE	On a	SINGUT	Dogce Ne	4 Imak	Change	Addition	
NAME	NEWMAN, JOYCE		1.21	AME		1757)5	(1) /2013	TA	nam	i Ch	
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CITY-ST-ZIP	MIAMI FL 33156			ITY-ST-	710	ra_/	uum	γ_1		77.09	
TITLE	PT			iile .	211 / W			· · ·	Change	Addition	
NAME	SCOTT, THOMAS E		2.21	IAME .	1.	1/-	· I am and	ſ			
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CITY-ST-ZIP	MIAMI FL 33156		2.4	ייווערי		2511	194 0	Reez	-	ļ	
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NAME			62 N								
STREET ADDRESS			638		·-··	· · · · · · · · · · · · · · · · · · ·	Process		1		
CITY-ST-ZIP	arth, that the information	ins (Lib. Oliver steeps) :-		ITY-ST-		nation 140 07/0	(VI) Florida Ctat	I formation and a	erification at	informet's-	
14. Fhereby 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 exponention 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 in this god, or on an attachment with an address.											