

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name

Child to Child Corp. **P97000026965**

FILED
Apr 26, 2000 8:00 am
Secretary of State

04-26-2000 90135 004 ***158.75

Principal Place of Business

Mailing Address

13611 S. Dixie Hwy.
#107
Miami FL 33176

720138

2. Principal Place of Business

3. Mailing Address

13611 S Dixie Hwy
Suite, Apt. #, etc.
#107

13611 S Dixie Hwy
Suite, Apt. #, etc.
#107

DO NOT WRITE IN THIS SPACE

City & State
Miami FL

City & State
Miami FL

4. FEI Number
65-074-1756

Applied For
Not Applicable

Zip
33176

Country
Dade

Zip
33176

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Linda Carmona-Sánchez
15422 SW 137 Place
Miami FL 33177

Name ~~Linda Carmona-S~~

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

City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE Linda Carmona-Sánchez Linda Carmona-Sánchez, Pres. 4/17/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Linda Carmona-Sánchez ☐ Delete
NAME 15422 SW 137 PL
STREET ADDRESS Miami FL 33177
CITY-ST-ZIP **PRESIDENT**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Linda Carmona-Sánchez Linda Carmona-Sánchez, President 4/17/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

(305) 251-4401

CR2E034 (9/99)