

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Mar 10, 2000 8:00 am**
Secretary of State

03-10-2000 90029 007 ***150.00

820844

DO NOT WRITE IN THIS SPACE

DOCUMENT # P97000071439

1. Entity Name

MY FIRST STEPS OF BRADENTON INC.

Principal Place of Business

Mailing Address

3506 18TH AVE W
FL 34205**3506 18TH AVE W**
BRADENTON FL 34205-1433

2. Principal Place of Business

3815 26 St. West

Suite, Apt. #, etc.

3. Mailing Address

3815 26 St. West

Suite, Apt. #, etc.

City & State

Bradenton, Florida

Zip

34205

Country

Manatee

City & State

Bradenton - Florida

Zip

34205

Country

Manatee

4. FEI Number

65-0774156

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

FERRER, GABRIEL
3506 18TH AVE W
BRADENTON FL 34205

7. Name and Address of New Registered Agent

Name

Mabel Freire

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

3815 26 St. West

City

Bradenton, FL

FL

Zip Code

34205

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

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 State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	P	☒ Delete
NAME	FERRER, GABRIEL	
STREET ADDRESS	3506 18TH AVE W	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE	T	☐ Delete
NAME	FERRER, CARINA	
STREET ADDRESS	3506 18TH AVE W	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE	S	☐ Delete
NAME	FREIRE, MABEL	
STREET ADDRESS	3506 18TH AVE W	
CITY-ST-ZIP	BRADENTON FL 34205	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	☒ Change ☐ Addition
NAME	President	
STREET ADDRESS	Mabel Freire	
CITY-ST-ZIP	3815 26 St. West	
CITY-ST-ZIP	Bradenton, FL 34205	
TITLE	T	☒ Change ☐ Addition
NAME	Treasure & Secretary	
STREET ADDRESS	Carina Piovera	
CITY-ST-ZIP	3815 26 St. West	
CITY-ST-ZIP	Bradenton, FL 34205	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-7-00**(941) 727-5511**

CR2E034 (9/99)