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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9700080387 (8)

AYMEE FOR KIDS, INC.

Principal Place of Business

Mailing Address

## FILED May 13 1998 8:00am Secretary of State



8505 MILLS DR., STE. G-111 8505 MILLS DR., STE, G-111 MIAMI FL 33183 MIAMI FL 33183 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/16/1997 2a. Mailing Address 2. Principal Place of Business Applied For 21 Not Applicable 26 Sulte, Apt. #, etc. Suite, Apl. #, etc. \$8.75 Additional 沟 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Country Z(p)8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30 ☐ Yes ☐ No 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MARTINEZ, VONNELL 8505 MILLS DR., STE. G-111 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33183 83 Ġ 84 City 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** (NOTE: Registered Agent signature required when reinstating) Signature, typed or protect own end in gask real agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change DELETE Addition TITLE DP 1.1 DILE NAME MARTINEZ, VONNELL 1.2 NAME 15440 SW 82 LANE #501 STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33193** 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE MARTINEZ, AYMER 15440 SW 82 lane #501 MARTINEZ, AYMEE NAME 22 NAME 15440 SW 82 LANE #501 STREET ADDRESS 2.3 STREET ADDRESS MIAMI 1-L 33193 **MIAMI FL 33193** CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change **Addition** 3.1 TITLE TITLE Deisell Montinez NAME 3.2 NAME 10904 SW 146PL STREET, ADDRESS 3.3 STREFT ADDRESS limui 33/8G CITY- \$ - ZIP 3.4. CITY-ST-ZIP DELETE Addition TITLE 4.1 THILE NAME 4.2 NAME Fanacio STREET ADDRESS 4.3 STREET ADDRESS 440 SW 33193 4.4 CITY-ST-ZIP MIAMI CITY-ST-ZIP Addition DELETE TITLE 5.1 TITLE 60000252620 NAME 5.2 NAME -0**5/**15/98--01108-5.3 STREET ADDRESS STREET ADDRESS \*\*\*8.75 5.4 CITY- ST- ZIP CITY-ST-ZIP DELETE 6000025262**0E**hange 61 DHE TITLE -05/15/98--01108--045 NAME 6.2 NAME \*\*\*150.00 STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

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; that I am an officer or director of the corporation or the receiver or trusted 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.

SIGNATURE:

98 (300) 273 60-04 04/25