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 #
1. Corporation Name

P97000081343 (0)

FLORIDA KIDS OF VERO BEACH, INCORPORATED

FILED Jan 22 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address		C 1001/00/ 110 101/4 100/1 004/1 004/1 004/1 004/1 104/0 10/04 (111) 04/00 4/1/1 104/
4855 N. HWY. A1A VERO BEACH FL 32963	4855 N. HWY. A1A VERO BEACH FL 32963		DO NOT WRITE IN THIS SPACE
			3. Date Incorporated or Qualified
2. Principal Place of Business	2a. Mailing Address		09/12/1997 4. FEI Number Applied For
21 4885 N. HWY AIA	26 4855 N. F	LY DID	59 - 3472216 Noi Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	ing AIA	\$9.75 Additional
22	27	· ·	6. Certificate of Status Desired Fee Required
City & State	City & State		Election Campaign Financing \$5.00 May Be
23 VERD BEACH		OCH, FL	Trust Fund Contribution Added to Fees
Zip Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24 32963 25	29 32943 3	o	Personal Property Tax due June 30. Yes No
9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
UPADHYAY, URVI		81 Name	110.4- 110.0-111.011
4855 N. HWY. A1A		82 Street Addr	URVI UPAD 11 YAY ess (P.O. Box Number is Not Acceptable)
VERO BEACH FL 32963		4855	S. N. HUY AIA
TENO DENOTITE GEOGR		83	<i>y</i>
		84 City 1/E/	RO BEACH FL 85 Zip Code 32963
11. Pursuant to the provisions of Sections 607.0502	and 607.1508. Florida Statutes		poration 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.			
the transfer of the Discourse			
SIGNATURE LIRVE UPADHYNY — Signature, typed or printed name of registrated agent		Red stered Agent signature require	ed when reinstating) DATE
12. OFFICERS AND		V 13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
title D	DELETE	1.1 TITLE D	Change Addition
NAME UPADHYAY, URVI		12 NAME UF	RYT /UP JD HYAY []
STREET ADDRESS 1771 SE CANORA RD.		1.3 STREET ADDRESS 17	to 1 /SE/ CANORA RD/
CITY-ST-ZIP PT. ST. LUCIE FL 34952		1.4 CITY- ST- ZIP	T/ST/ 4ucret, FL 34982
TITLE	DELETE	21 TITLE	Change Addition
NAME		2.2 NAME	(
STREET ADDRESS		23 STHEFT ADDRESS	
CITY-S1-ZIP		2 4 CHY-ST-ZIP	
TITLE	DELETE	3.1 TITLE	Change Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CiTY-ST-ZIP		3 4. CITY - ST - ZIP	
TITLE	DELETE	4.1 HTLE	☐ Change ☐ Addition
NAME		4 2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4 4 City-St-Zip	
TITLE	☐ DELE TE	5.1 TITLE	Change Addition
NAME	_	5 2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-SI-ZIP		5 4 CITY - ST - ZIP	
TITLE	DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	<u>-</u> -·· ·	6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 accur	ate and that my signatur	re 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 fusile empowered to execute this report as required by Chapter 607, Florida Statules; and that my name appears in Block 13 if changed, or on an attachment with an address.