

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

FILED  
May 05 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000100802 (2)

1. Corporation Name  
**LITTLE PEOPLE LEARNING CENTERS OF BOCA, INC.**



Principal Place of Business <b>420 N.W. 66TH AVE. MARGATE FL 33063</b>	Mailing Address <b>420 N.W. 66TH AVE. MARGATE FL 33063</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>11/25/1997</b>	
21 Suite, Apt. #, etc.	22 City & State	25 Suite, Apt. #, etc.	27 City & State	4. FEI Number <b>65-0797273</b>	Applied For <input type="checkbox"/> Not Applicable
23 Zip	25 Country	29 Zip	30 Country	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>STEWART, ARTHUR RAY 899 S.W. 10TH AVE. BOCA RATON FL 33486</b>				10. Name and Address of New Registered Agent	
				81 Name <b>KAREN KHAN</b>	
				82 Street Address (P.O. Box Number is Not Acceptable) <b>1284 S.W. 14th STREET</b>	
				83	
				84 City <b>BOCA RATON</b>	85 Zip Code <b>FL 33486</b>

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 *Karen Khan* **KAREN KHAN, President**

Signature, typed or printed name of registered agent and title if applicable

(Note: Registered Agent signature required when reinstating)

DATE **4/28/98**

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	<b>PRESIDENT</b>	<input type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	<b>KAREN KHAN</b>			1.2 NAME			
STREET ADDRESS	<b>1284 S.W. 14th St.</b>			1.3 STREET ADDRESS			
CITY-ST-ZIP	<b>BOCA RATON, FL 33486</b>			1.4 CITY-ST-ZIP			
TITLE	<b>SECRETARY</b>	<input type="checkbox"/> DELETE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	<b>ARTHUR R. STEWART</b>			2.2 NAME			
STREET ADDRESS	<b>899 S.W. 10th AVE.</b>			2.3 STREET ADDRESS			
CITY-ST-ZIP	<b>BOCA RATON, FL 33486</b>			2.4 CITY-ST-ZIP			
TITLE	<b>VICE PRES</b>	<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	<b>MARIAN B MILLER</b>			3.2 NAME			
STREET ADDRESS	<b>1320 S.E. 10th ST</b>			3.3 STREET ADDRESS			
CITY-ST-ZIP	<b>DEERFIELD BCH FL 33441</b>			3.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *Karen Khan* **KAREN KHAN**

DATE **4/28/98**

FILE # **20140395**

CR2E034 (10/97)