

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **998000008051**

1. Corporation Name

TODDLER TECH ACADEMY - FORT MYERS II, INC.

Principal Place of Business

Mailing Address

**2775 E. Oakland Park Blvd., #10
Fort Lauderdale, FL 33308**

FILED

99 AUG 18 PM 4:56

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	4750 Oakes Road
22	City & State	27	Suite M
23	Zip	28	Davie, FL
24	Country	29	33314
25		30	USA

DO NOT WRITE IN THIS SPACE	
3. Date Incorporated or Qualified January 26, 1998	
4. FEI Number 65-0819762	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes the current year intangible Personal Property Tax <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
10. Name and Address of New Registered Agent	

9. Name and Address of Current Registered Agent

**TIMOTHY H. KENNEY, ESQ.
189 Bradley Place
Palm Beach, FL 33480**

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

FL

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

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

(NOTE: Registered Agent signature required when terminating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President/Secretary <input type="checkbox"/> DELETE	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVID F. LEVY	12 NAME	400002970244--2
STREET ADDRESS	4750 Oakes Road, Ste. M	13 STREET ADDRESS	-08/25/99--01081--013
CITY-ST-ZIP	Davie, FL 33314	14 CITY-ST-ZIP	***1050.00 ****150.00
TITLE	V-P of Finance/Treasurer <input type="checkbox"/> DELETE	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ARNALDO JAGLE	22 NAME	
STREET ADDRESS	4750 Oakes Road, Ste. M	23 STREET ADDRESS	
CITY-ST-ZIP	Davie, FL 33314	24 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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 in this filing, or in an attachment with an address, with all other like empowered.

Signature of Officer/Director **David F. Levy - President** Date **8/16/99** Daytime Telephone **(954) 581-5445**

Timothy H. Kenney, P.A.**Attorney at Law****P.O. Box 708****189 Bradley Place****Palm Beach, Florida 33480-0708**

Telephone:

(61) 833-8773

August 16, 1999

Fax # (561) 833-0543

Secretary of State
Division of Corporations
9 East Gaines Street
Tallahassee, FL 32399

Re: Annual Reports — Levy Corporations
Our File: LEY 4901

Dear Sir/Madam:

Please be advised that this office represents the following corporations:

1. SF 2 Academy, Inc.
2. Alpha Academy I, Inc.
3. Alpha Academy II, Inc.
4. Toddler Tech Academy - Davie, Inc.
5. Toddler Tech Academy - Fort Myers I, Inc.
6. Toddler Tech Academy - Fort Myers II, Inc.
7. Toddler Tech Academy - Miramar, Inc.

We have filed the Annual Reports and paid the late filing fees. However, I have been advised by my client that they never received the Annual Reports, hence the reason why they are late.

The Annual Reports were sent to an old address (2775 East Oakland Park Boulevard, #10, Fort Lauderdale, Florida 33308), however, the corporations moved from that address and the Annual Reports were not forwarded. Therefore, we would ask that you accept this letter as a request for a waiver of the late fees that have been paid and would ask for a refund of the late fee portion of the annual fees.

Your kind attention to this matter will be appreciated.

Very truly yours,

TIMOTHY H. KENNEY

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