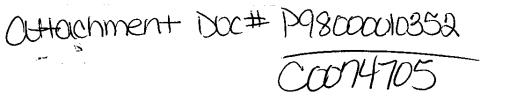
## FILED Aug 01, 2001 8:00 am

KIDS FIRS	T LEARNING CENTER, INC		(h	Secretary 01 08-01-2001 90202 046			
Principal Place of Business 7040 W PALMETTO PARK ROAD BOCA RATON FL 33433 US		Mailing Address 7040 W PALMETTO PARK ROAD BOCA RATON FL 33433 US		7001470D			
2. Principal Place of Business		3. Mailing Address		- I I OOK OOL HIN EELINI ANNIA OOKIA OOLIK BAAHA OBIIDI 	14 <b>6</b> 11 <b>04100</b> 14101 <b>0</b>	1310 1303 1501	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE			
City & State		City & State		4. FEI Number 65-0856490	— — — ·	plied For t Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Add Fee Required		
	6. Namé and Address of Current	Registered Agent	1	7. Name and Address of New Registered	Agent		
			Name	Name			
HANNA, MARTIN J 1515 UNIVERSITY DR.,STE.214			Street Address	treet Address (P.O. Box Number is Not Acceptable)			
CORAL SP	PRINGS FL 33071		City	FL Zip Code			
8. The above	named entity submits this statement for statement for signature, typed or printed name of registered agent	·	s registered office or regist  TE: Registered Agent signature require	ered agent, or both, in the State of Florida.  ed when reinstating)  DATE			
Tax filing r	oration is eligible to satisfy its Intangible requirement and elects to do so.	After September 1	/!!! FEE IS \$550.00 2, 2001 Fee will be \$75 able to Department of St	ate Trust Fund Contribution.	☐ Ådded	<b>0</b> May Be to Fees	
11.	OFFICERS AND		12.	ADDITIONS/CHANGES TO OFFICERS AN			
NAME	PVP FERSTEN, MARC 9538 SW 1ST CT. CORAL SPRINGS FL 33071	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST FERSTEN, MARC 9538 SW 1ST CT. CORAL SPRINGS FL 33071	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Change	☐ Addition	
TITLE		☐ Delete	TITLE		Change	Addition	
NAME STREET ADDRESS		جوستاه فيحمين فيستحمني المستبعي والرجوان		يدينه سندينه المستنفينيني سسست		پـــدرسيد	
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STREET ADDRESS		☐ Delete	STREET ADDRESS		☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ Delete ☐ Delete .	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	· ·	☐ Change	☐ Addition ☐ Addition	

changed, or on an attachment with an address

**2001 UNIFORM BUSINESS REPORT (UBR)** 

Marcherster //esilet 7/27/01
OFFICER OR DIRECTOR
Date



DIVISION OF CORPORATIONS P.O. BOX 1500 TALLAHASSEE, FL. 32302

## **GENTLEMEN:**

I AM HEREBY REQUESTING AN ABATEMENT OF THE PENALTY OF \$400 FOR LATE FILING. ON THE DUE DATE OF THIS RETURN ( WHICH I NEVER RECEIVED) I WENT ON THE INTERNET TO PAY THE AMOUNT DUE. HOWEVER I WAS GIVEN A DIFFERENT AMOUNT TO PAY (92.00). UPON SUBMISSION, THIS WAS REJECTED BY YOU AS A PAYMENT. SINCE I HAD NO FORM TO FOLLOW UNTIL I RECEIVED THIS FORM, I HAD NO IDEA WHAT NEEDED TO BE FILED.

I AM HEREWITH ENCLOSING A CHECK IN THE AMOUNT OF \$150.00, AND AGAIN REQUEST AN ABATEMENT OF THE PENALTY OF \$400.00.

YOURS TRULY

MARC FERSTEN / PRES.