

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 01, 2001 8:00 am
Secretary of State

08-01-2001 90202 046 ***150.00

DOCUMENT # P98000010352

1. Entity Name

KIDS FIRST LEARNING CENTER, INC.

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**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0856490

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HANNA, MARTIN J
1515 UNIVERSITY DR.,STE.214
CORAL SPRINGS FL 33071**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**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
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)

Attachment Doc# P98000010352
C0074705


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.