2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000039111

Entity Name: A - Z CHILD DEVELOPMENT CENTER, INC.

FILED Apr 20, 2004 Secretary of State

Current Dringing Place of Business.	New Dringing Diago of Duginger
Current Principal Place of Business:	New Principal Place of Business:

9652 HOOD RD.

JACKSONVILLE, FL 322571141

Current Mailing Address: New Mailing Address:

9652 HOOD RD.

JACKSONVILLE, FL 322571141

FEI Number: 59-3508357 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SHONEKAN, C. BOLANLE MRS.
7901 BAYMEADOWS CIRCLE EAST, STE.304

SHONEKAN, C. BOLANLE MRS.
5387 CUMBERLAND FOREST LANE

JACKSONVILLE, FL 32256 US JACKSONVILLE, FL 32257 US

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: REV. G. BOLANLE SHONEKAN 04/20/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO () Delete Title: () Change () Addition

Name: SHONEKAN, C. BOLANLE MRS. Name:

 Address:
 9652 HOOD ROAD
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 322571141
 City-St-Zip:

Title: CD () Delete Title: CD (X) Change () Addition Name: SHONEKAN, G. BOLANLE CHEIF Name: SHONEKAN, G. BOLANLE REV. Address: 9652 HOOD ROAD Address: 9652 HOOD ROAD

City-St-Zip: JACKSONVILLE, FL 322571141 City-St-Zip: JACKSONVILLE, FL 322571141

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: REV. G. BOLANLE SHONEKAN CD 04/20/2004