

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED

99 DEC 30 PM 3:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P980000045824

1. Corporation Name
KALEIDOSCOPE OF PEMBROKE PINES, INC
2450 HOLLYWOOD BLVD. SUITE 506
HOLLYWOOD, FL 33020

Principal Place of Business
Mailing Address
1890 NW 122ND TERR.
PEMBROKE PINES, FL 33026

REINSTATEMENT 1999

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 1890 NW 122ND TERR Suite, Apt. #, etc. City & State Pembroke Pines, FL Zip 33026	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30	3. Date Incorporated or Qualified 5/21/98	4. FEI Number 1 65-0838687	Applied For Not Applicable
		5. Certificate of Status Desired \$8.75 Additional Fee Required		
		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
		8. This corporation owes the current year Intangible Personal Property. Yes No		

9. Name and Address of Current Registered Agent ATLANTIS REGISTERED AGENTS, INC. 2295 CORPORATE BLVD SUITE 134 BOCA RATON, FL 33431	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL
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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: Gerald Damsky
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE: 12/20/99

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP PRES GERALD DAMSKY 3640 YACHT CLUB DR # 204 AVENTURA, FL 33180	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 300003099663--8 -01/14/00--01035--022 ***750.00 ***250.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP TRES. NANCY E. BREWER 2795 E. VALLEY RD. MORTECITO, CA 93108	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 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: 10/14/99 954-434-4545

CR2E034 (5/99)