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 # P98000047807

1. Corporation Name

ALL ABOUT KIDZ OF TAMPA BAY, INC.

-Principal	

Mailing Address

2804 1/2 E CARCAS ST **TAMPA FL 33601**

2804 1/2 E CARCAS ST **TAMPA FL 33601**

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90049 042 ***150.00



				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualifed	
1				05/28/1998	
2. Principal Pl	ace of Business 2a. Mailing Address			4. FEI Number Applied For	
21 280	14 /2 E. Caracas St 26			59347497) Not Applicable	
Suite, Apt.	# etc. Suite, Apt. #, etc.			\$8.75 Additional	
				5. Certificate of Status Desired Fee Required	
City & State				6. Election Campaign Financing S5.00 May Be	
				Trust Fund Contribution Added to Fees	
23 7 an	199, F) 28 2in	Counti			
Zip Country Zip 23 Hr 1/6h 29 30		¬	Country 8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No		
24 000	1 7 2 2	<u> </u>		10. Name and Address of New Registered Agent	
	9. Name and Address of Current Registered Agent	8	1 Name	Tu. Teprile dita Address of New Yorkstone Tige.	
DET	NE LANGE D	٦	Name		
REESE, JANICE B		8	82 Street Address (P.O. Box Number is Not Acceptable)		
	PROWMORE DRIVE				
(BRAI	NDON FL 33511-2804	8	3		
		8	4 City	85 Zip Code	
			City	FL FL	
11. Pursuant	to the provisions of Sections 607.0502 and 607.1508, Florida Statutes	, the abo	ve-named	corporation submits this statement for the purpose of changing its registered	
office or re	edistared agent, or both, in the State of Florida, SUCII change was auti	norizea u	y the corpo	oration's board of directors. I hereby accept the appointment as registered	
agent. i ai	n familiar with, and accept the obligations of, Section 607.0505, Florid	a Statute	ъ.		
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re	egistered Ag	ent signature d	required when reinstating) DATE	
12.	OFFICERS AND DIRECTORS	13.	1	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D DELETE	1.1 TITLE		Reese, LArry C. Sr Change DAddition	
	_	1.2 NAME		(Neese) Chiry C	
NAME	MONTAGUE, SANDRAL			Brancon, Fla 33511	
STREET ADDRESS	1610 PROWMORE DR		ET ADDRESS	A a 1000 510 3251	
CITY-ST-ZIP	BRANDON FL 33511	1.4 CITY-		Change Addition	
TITLE	D DELETE	2.1 TTLE		Charge Dyoung	
NAME	NAME REESE, JANICE B 23				
STREET ADDRESS 1612 PROWMORE DRIVE 2		2.3 STRE	ET ADDRESS		
CITY-ST-ZIP	BRANDON FL 33511	2. 4 CITY	ST-ZIP		
TITLE	D DELETE	3.1 TITLE		☐ Change ☐ Addition	
NAME I	UPSHAW, SHERMAN				
		3.3 STRE	ET ADDRESS		
l l		3.4. CITY			
CITY-ST-ZIP	TAMPA FL 33605	4.1 TITLE		☐ Change ☐ Addition	
TITLE	_ occert	4.1 MAM			
NAME		1			
STREET ADDRESS			ET ADDRESS		
CITY-ST-ZIP		4.4 CITY		☐ Change ☐ Addition	
TITLE	☐ DELETE	5.1 TITLE		Change Addition	
NAME		5.2 NAMI			
STREET ADDRESS		5.3 STRE	ET ADDRESS		
CITY-ST-ZIP		5.4 CITY	ST-ZIP		
TITLE	DELETE	6.1 TITLE		Change Addition	
NAME		6.2 NAM			
		6.3 STRE	ET ADDRESS		
STREET ADORESS CITY-ST-ZIP		6.4 CITY			
		0.7 (7)	01-FIL.		

I nereby ceruity 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, with all other like empowered.

SIGNATURE:

Daytime Phone #