

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000073909

1. Entity Name

MY KIDS, INC.

FILED
Apr 13, 2000 8:00 am
Secretary of State

04-13-2000 90037 015 ***150.00

Principal Place of Business

Mailing Address

N.E. 5TH STREET
HALLANDALE FL 33009-E

115 N.E. 5TH STREET
HALLANDALE FL 33009-4220



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2755 S.W. 32nd Ave

3. Mailing Address

2755 S.W. 32nd Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Pembroke Park, FL

City & State

Pembroke Park, FL

Zip

Country

33023 U.S.

Zip

Country

33023 U.S.

4. FEI Number

65-0876552

Applied For

Not Applicable

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

RITTER, GREGORY J ESQ.
7000 WEST PALMETTO PARK ROAD
SUITE 400
BOCA RATON FL 33433

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 \$150.00
After MAY 1, 2000 Fee will be \$550.00
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

TITLE ☐ Delete

P
NAME SCHIFFRES, CARY
STREET ADDRESS 115 N.E. 5TH STREET
CITY-ST-ZIP HALLANDALE FL 33009

TITLE ☐ Delete

S
NAME PERRY, LISA
STREET ADDRESS 115 N.E. 5TH STREET
CITY-ST-ZIP HALLANDALE FL 33009

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition

NAME
STREET ADDRESS 2755 S.W. 32nd Ave.
CITY-ST-ZIP Pembroke Park, FL 33023

TITLE ☒ Change ☐ Addition

NAME
STREET ADDRESS 2755 S.W. 32nd Ave.
CITY-ST-ZIP Pembroke Park, FL 33023

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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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)