FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CCRPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secreta y of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P98000098951

Principal Place of Business

KIDS LOVE US OF ORLANDO. INC.

4605 HOWELL BRANCH RD. 4605 HOWELL BRANCH RD. WINTER PARK FL 32792 WINTER PARK FL 32792 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 11/18/1998 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business 59-3545673 Not Applicable 26 21 \$8.75 Acditional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired П Fee Required 27 22 City & State 6. Election Campaign Financing \$5.00 May Be City & State Added to Fees Trust Fund Contribution 28 23 Country 8. This corporation owes the current year Intangible Zip Zip Coun ry ☐ Yes Personal Property Tax. 30 25 29 24 10. Name and Address of New Registere J Agent 9. Name and Address of Current Registered Agent 81 PETRIE, COLEMAN A Street Address (P.O. Box Number is Not Acceptable) 82 4605 HOWELL BRANCH RD. WINTER PARK FL 32792 83 Zip Code 85 84 City 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 cr registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of cirectors. I hereby accept the appointment as registered agent, am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOT:: Registered Agent signature required when reinstating) Signature, typed or printed na ne of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR'S IN 12 OFFICERS AND DIRECTORS 13 12. Change Addition □ DELETE 1.1 TITLE TITLE PETRIE, COLEMAN 12 NAME NAME 4605 HOWELL BRANCH RD. 1.3 STREET ADDRESS STREET ADDRESS WINTER PARK FL 32792 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition President Change DELETE 2.1 TITLE TITLE Petrie, Elizabeth A. 4605 Howell Branch Rd. Winter Park FL 32792 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change DELETE 5.1 TITLE TITLE 5.2 NAME

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0"(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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

Change

☐ Addition

(11/98)CR2E034

FILED

Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90283 017 ***150.00