

**2000 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Aug 08, 2000 8:00 am**  
**Secretary of State**

08-08-2000 90097 008 \*\*\*150.00

DOCUMENT # **P990000030266**

1. Entity Name  
**GUARDIAN ANGELS ChildCARE, Inc.**

**A0072037**

Principal Place of Business      Mailing Address  
**3750 N.E. 3rd AVE.**      **P.O. BOX 543**  
**POMPANO BEACH, FL**      **POMPANO BEACH, FL**  
**33064**      **33061-0543**

2. Principal Place of Business      3. Mailing Address  
**GUARDIAN ANGELS ChildCARE, Inc.**      **GUARDIAN ANGELS ChildCARE, Inc.**  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.  
**3750 N.E. 3rd AVE**      **P.O. BOX 543**

DO NOT WRITE IN THIS SPACE

City & State      City & State      4. FEI Number      Applied For  
**POMPANO BEACH, FL**      **POMPANO BEACH, FL**      **65-0934846**       Not Applicable  
 Zip      Country      Zip      Country      5. Certificate of Status Desired       **\$8.75** Additional Fee Required  
**33064**      **USA**      **33061**      **USA**

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

Name      **LINDA SCRUTON**  
 Street Address (P.O. Box Number is Not Acceptable)  
**370 N.E. 24th ST**  
 City      **BOCA RATON**      FL      Zip Code  
**33431**

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 *Linda Scorton*      DATE **8-2-00**  
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      **\$5.00** May Be  
 Trust Fund Contribution.       Added to Fees

**11. OFFICERS AND DIRECTORS**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>PRESIDENT</b>	<input type="checkbox"/>		
<b>MARTHA HALE</b>			
<b>P.O. BOX 543</b>			
<b>POMPANO BEACH, FL 33061-0543</b>			

CR2E034 (9/99)

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: *Martha Hale*      Date **Aug. 2, 2000**      Daytime Phone # **954-427-7491**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

attachment Doc#

P99000030266  
A0072037

AUGUST 3, 2000

DIVISION OF CORPORATIONS  
409 EAST GAINES STREET  
TALLAHASSEE, FLORIDA 32399

RE: 2000 UNIFORM BUSINESS REPORT  
GUARDIAN ANGELS CHILDCARE, INC.

DIVISION OF CORPORATIONS,

ENCLOSED IS MY 2000 UNIFORM BUSINESS REPORT FOR MY CORPORATION,  
GUARDIAN ANGELS CHILDCARE, INC., ALONG WITH MY CHECK FOR \$150.00.

BEING A NEW CORPORATION, I WAS UNAWARE OF THE PROCEDURE FOR  
ANNUAL RENEWING. I HAVE ALSO MOVED FROM LAST YEAR'S PHYSICAL  
LOCATION AND DID NOT RECEIVE THE FIRST OR SECOND NOTICE YOU  
MAILED OUT, DUE TO A MISUNDERSTANDING OF MY PREVIOUS LANDLORD  
IN FORWARDING ANY MAIL TO ME.

I SINCERELY APOLOGIZE FOR MAILING THIS IN LATE. IN FACT, IT WAS  
QUITE BY ACCIDENT I LEARNED OF THE RENEWAL. IN RENEWING MY  
ANNUAL CHILD CARE LICENSE, ONE OF THE REQUIREMENTS IS A STATUS  
REPORT ON MY CORPORATION. WHEN I CALLED TO OBTAIN THAT  
INFORMATION, I LEARNED OF THIS SITUATION ————AND ABOUT HAD A  
HEART ATTACK !! SERIOUSLY, I WAS VERY SURPRISED AND CONCERNED.  
SO I IMMEDIATELY REQUESTED A FORM, AND AM MAILING IT BACK THE  
NEXT DAY AFTER RECEIVING IT.

IF AT ALL POSSIBLE, CAN YOU PLEASE PROCESS THIS AS SOON AS  
POSSIBLE, SO I MAY OBTAIN AN ACTIVE STATUS REPORT FOR MY CHILD  
CARE LICENSE WHICH IS DUE BEFORE SEPTEMBER 1, 2000.

AGAIN, I AM SORRY AND WILL BE AWARE OF YOUR PROCEDURE FOR  
THIS NEXT YEAR.

THANKS,  
*Martha Hale*  
MARTHA HALE, PRESIDENT  
GUARDIAN ANGELS CHILDCARE, INC  
P.O. BOX 543  
POMPANO BEACH, FL 33061 - 0543