## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # P99000089340

1. Entity Name

TAMPA BAY KIDS NET INC.



FILED May 07, 2007 08:00 A Secretary of State

Principal Place of Business

2555 ENTERPRISE RD

UNIT 15

CLEARWATER, FL 33763

Mailing Address

2555 ENTERPRISE RD

UNIT 15

CLEARWATER, FL 33763



05022007

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3613547

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MCCORMACK, J ROBERT 2555 ENTERPRISE ROAD UNIT 15 CLEARWATER EL 33763

## DO NOT WRITE IN THIS SPACE

CLEARWATER, FL 33/63			}	IN THIS STASE			
	named entity submits this statement for the tions of registered agent.	purpose of changing its registe	ered office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and a	ccept	
SIGNATURE			ered Agent signature	gant signature required when reinstiding) DATE			
FILE NOW!!! FEE IS \$150.00  Due by September 14, 2007  9. Election Campaign Fina Trust Fund Contribution.				\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., corporation did not receive the prior notice	the	
0. OFFICERS AND DIRECTORS					<u> </u>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD MCCORMACK, CRISTINA D 1026 SKYE LANE PALM HARBOR, FL 34683				U00000762321 05/29/07-80001-018 15(		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD MCCORMACK, J ROBERT 1026 SKYE LANE PALM HARBOR, FL 34683				00,50,01_00001_018_12(	J. UU	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	ļ	
TITLE NAME Street Address City-St-Zip				IN '	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP				; · · ·			

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 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

3-2-07

1276425282

Daytime I