2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S53400

FILED May 03, 2006 Secretary of State

Entity Name: BEAR HUGS CHILD CARE CENTER, INC

Current Principal Place of Business:		New Principal Place of Business:		
	'ICKHAM RD RNE, FL 32940'	7131		
urrent N	/lailing Addres	s:	New Mailing Address	s:
	(E BLVD. DGE, FL 32955			
El Number	r: 59-3069736	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	d Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:
ANG, BA 045 N W	ARRY ICKHAM RD			
1ELBOUF	RNE, FL 32935	US		
he above	,		purpose of changing its registere	d office or registered agent, or both,
he above the Stat	e named entity s e of Florida.		purpose of changing its registere	d office or registered agent, or both,
he above the Stat	e named entity see of Florida.			d office or registered agent, or both, Date
he above the Stat IGNATU accordar	e named entity see of Florida. RE: Electronice with s. 607.193	ubmits this statement for the position of the position of Registered Ag (2)(b), F.S., the corporation did no	ent	
The above the Stat SIGNATU accordar lection Ca	e named entity see of Florida. RE: Electronice with s. 607.193	ubmits this statement for the construction of Registered Ag (2)(b), F.S., the corporation did not rust Fund Contribution ().	ent ot receive the prior notice.	
he above the Stat IGNATU accordar ection Ca FFICER tte: ame: ddress:	e named entity see of Florida. RE: Electronice with s. 607.193 Impaign Financing	ubmits this statement for the particle of Registered Ag (2)(b), F.S., the corporation did not rust Fund Contribution (). **CORS:** Delete **ACRES BLVD	ent ot receive the prior notice.	Date
he above the Stat IGNATU accordar lection Ca	e named entity see of Florida. RE: Electronic Electron	ubmits this statement for the particle of Registered Ag (2)(b), F.S., the corporation did not rust Fund Contribution (). **TORS:** Delete E ACRES BLVD L 32955 Delete E ACRES BLVD.	ent ot receive the prior notice. ADDITIONS/CHANGI Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARRY J LANG MR 05/03/2006