SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 0, 1995.
AMOUNT DUE ON OR BEFORE 5/0/95: $325 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 JUL 11 AM 9:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S62561 (3)

1. Corporation Name
STAR KIDS, INC.

Principal Place of Business	Mailing Address
9166 W. ATLANTIC BLVD. SUITE 16-16 CORAL SPRINGS FL 33071	12179 N WEST 10 CT. SUITE 16-16 CORAL SPRINGS FL 33071 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 06/21/1991
3a. Date of Last Report: 06/24/1994

2. Principal Place of Business	2a. Mailing Address
21 906 No. Federal Hwy	26 906 No. Fed. Hwy
Suite, Apt. #, etc. 22 —	Suite, Apt. #, etc. 27 —
City & State 23 Ft. Laud. FLA.	City & State 28 Ft. Laud. FLA.
Zip 24 33304 Country 25 USA.	Zip 29 33304 Country 30 USA.

4. FEI Number: 65-0281003 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

BERNSTEIN, STEVEN
906 N FEDERAL HWY
SUITE 304
FT LAUDERDALE FL 33304

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	V	☒ Change ☐ Addition
NAME	BERNSTEIN, ARLENE	1.2 NAME	Arlene Bernstein	
STREET ADDRESS	9166 W. ATLANTIC BLVD.	1.3 STREET ADDRESS	12179 N.W. 10th CT	
CITY-ST-ZIP	CORAL SPRINGS FL	1.4 CITY-ST-ZIP	Coral Springs, FLA. 33071	
TITLE	D	2.1 TITLE	P	☒ Change ☐ Addition
NAME	BERNSTEIN, STEVEN	2.2 NAME	Steven Bernstein	
STREET ADDRESS	9166 W. ATLANTIC BLVD.	2.3 STREET ADDRESS	12179 NW 10th CT	
CITY-ST-ZIP	CORAL SPRINGS FL	2.4 CITY-ST-ZIP	Coral Springs, FLA. 33071	
TITLE		3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

CR2E034 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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.

SIGNATURE: Steven Bernstein (Pres.) 7-5-95 305-527 1168
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Steven Bernstein

0141814 FP