

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

FILED

Jan 20 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # S67121 (1)
1. Corporation Name
KINDERAMA, INC.



Principal Place of Business
5885 LAKE WORTH ROAD
GREENACRES CITY FL 33463

Mailing Address
5885 LAKE WORTH ROAD
GREENACRES CITY FL 33463

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 2104 TIGRIS DRIVE

27 WEST PALM BEACH

28 City & State

28 FLORIDA

29 Zip

33411

Country

3. Date Incorporated or Qualified

07/18/1991

4. FEI Number

65-0277578

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.



Yes



No

9. Name and Address of Current Registered Agent

JEFFREY, JOHN
2133 POLO GARDENS DRIVE
APT. 304
WEST PALM BEACH FL 33414

10. Name and Address of New Registered Agent

81 Name JEFFREY JOHN
82 Street Address (P.O. Box Number is Not Acceptable)
2104 TIGRIS DRIVE
83 WEST PALM BEACH
84 City
85 Zip Code
FL 33411

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PS

NAME JEFFREY, BARBARA DOROTHY

STREET ADDRESS 2133 POLO GARDENS DR.

CITY-ST-ZIP W PALM BEACH FL

TITLE VPT

NAME JEFFREY, JOHN

STREET ADDRESS 2133 POLO GARDENS DR.

CITY-ST-ZIP W PALM BEACH FL 33414

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PS

1.2 NAME JEFFREY, BARBARA DOROTHY

1.3 STREET ADDRESS 2104 TIGRIS DRIVE

1.4 CITY-ST-ZIP WEST PALM BEACH, FL, 33411

2.1 TITLE VPT

2.2 NAME JEFFREY, JOHN

2.3 STREET ADDRESS 2104 TIGRIS DRIVE

2.4 CITY-ST-ZIP WEST PALM BEACH, FL 33411

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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, upon an attachment with an address.

SIGNATURE: JEFFREY JOHN 1/7/98 561.123.3999

CR2E034 (10/97)