

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

FILED  
Feb 06 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V24890 (8)  
1. Corporation Name  
KALEIDOSCOPE EARLY LEARNING CENTERS, INC.



Principal Place of Business 6480 W ATLANTIC BLVD MARGATE FL 33063 US	Mailing Address 3610 YACHT CLUB DRIVE SUITE 1402 N. MIAMI BEACH FL 33180
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 2445 Hollywood Blvd. 27 Suite, Apt. #, etc. 28 Hollywood, FL 29 Zip 30 33020 31 Country 32 Broward		3. Date Incorporated or Qualified 03/30/1992	
				4. FEI Number 65-0328974 Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

AGENTS, ATLANTIS REGIS I  
5355 TOWN CENTER RD  
SUITE 301  
BOCA RATON FL 33486

10. Name and Address of New Registered Agent

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

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D
NAME	DAMSKY, GERALD R.	1.2 NAME	DAMSKY, GERALD R.
STREET ADDRESS	3610 YACHT CLUB DR., 1402	1.3 STREET ADDRESS	3610 YACHT CLUB DR. #204
CITY-ST-ZIP	N. MIAMI BEACH FL	1.4 CITY-ST-ZIP	AVENUE, FL 33180
TITLE	D	2.1 TITLE	D
NAME	BREWER, NANCY	2.2 NAME	BREWER, NANCY
STREET ADDRESS	542 S. LORRAINE	2.3 STREET ADDRESS	2795 EAST VALLEY ROAD
CITY-ST-ZIP	LOS ANGELES CA	2.4 CITY-ST-ZIP	MONTICELLO, CA 93108
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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, or on an attachment with an address.

SIGNATURE



GERALD R. DAMSKY

1/28/98

954-939-2233

CR2E034 (10/97)