

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V29646

Entity Name: PRECIOUS KIDZ INC.

FILED  
Feb 19, 2009  
Secretary of State

**Current Principal Place of Business:**

4113 N DIXIE  
POMPAN0 BCH., FL 33064 US

**New Principal Place of Business:**

**Current Mailing Address:**

401 NE 39 ST  
POMPAN0 BEACH, FL 33064

**New Mailing Address:**

FEI Number: 65-0327690

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SHEPPARD, CHARLIE A.  
401 NE 39 ST  
POMPOANO BEACH, FL 33064 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SHEPPARD, CHARLIE A.,  
Address: 401 NE 39 ST  
City-St-Zip: POMPAN0 BEACH, FL 33064

Title: T ( ) Delete  
Name: SHEPPARD, CRAIG  
Address: 401 N E 39TH STREET  
City-St-Zip: POMPAN0 BEACH, FL 33064

Title: V ( ) Delete  
Name: SHEPPARD, CYNTHIA  
Address: 401 NE 38 STREET  
City-St-Zip: POMPAN0 BEACH, FL 33064

Title: S ( ) Delete  
Name: GREEN, COLETTE  
Address: 1749-36A 80TH AVENUE  
City-St-Zip: MARGATE, FL 33063

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: SHEPPARD, CYNTHIA G V.PRES  
Address: 401 NE 38 STREET  
City-St-Zip: POMPAN0 BEACH, FL 33064

Title: S (X) Change ( ) Addition  
Name: GREEN, COLETTE G SECR  
Address: 1749-36A 80TH AVENUE  
City-St-Zip: MARGATE, FL 33063

I hereby certify that the information supplied with this filing does not qualify 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: CHARLIE A. SHEPPARD

PRES

02/19/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date