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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(2)

KIDS ARE IT, INC.

FILED Apr 08 1998 8:00am Secretary of State

Principal Place of Business Mailing Address							
2900 W. SAMPLE RD 2900 W. SAMPLE RD							
POMPANO BEACH FL 33073			POMPANO BEACH FL 33073				DO NOT MIDITE IN THIS SPACE
US		U	J\$				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
							07/16/1992
2. Principal P	lace of Business	2a.	Mailing Address				4. FEI Number Applied For
⊢ , ` ⊢			3				65-0354405 Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				SR 75 Additional
22							5. Certificate of Status Desired Fee Required
City & State			City & State				6. Election Campaign Financing \$5.00 May Be
23		28					Trust Fund Contribution Added to Fees
Zip				intry		8. This corporation owes or has paid the current year Intangible	
24	25] 29] [30]			[30]	_		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
9, Name and Address of Current Registered Agent CARDON SECENCY A 81 Name						10. Haine and Address of New Pregistered Agent	
	ARROW, JEFFREY A					1431110	
300 S PINE ISLAND ROAD					82	Street Ad	ddress (P.O. Box Number is Not Acceptable)
	UITE 304 LANTATION FL 33324				83		
_	LANIATION PL 33324						
					84	City	FL 85 Zip Code
11 Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-pamed corporation submits this statement for the purpose of changing its registered							
office or registored 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	William William Bridge pri and oblige		(3000)	0.100 010		•	
Signature, typed or protect name of registered agent and title if app#cable (NOTE: Registered Agent signature required when reinstating) DATE							
12.	OFFICERS AND	DIREC.		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D		☐ DELETE	1.1 T			Change L Addition
NAME	WRIGHT, GOENTJE			1.2 N	-		
STREET ADDRESS	21770 LITTLE BEAR LANE			- 1		ADDRESS	
CITY-ST-ZIP			1.4 C		T-ZIP	Charge Addition	
TITLE NAME	COYLE, OCEANIA		D DECENE	2.1 N			
STREET ADDRESS	21493 WOODCHUCK WAY					ADDRESS	
ł - · · I	BOCA RATON FL					į.	
CITY-ST-ZIP TITLE	DOOKTRIOITE		DELETE	3.1 T		ST-ZIP	Change Addition
NAME			Britan and Color	3.2 N			
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP						ST - ZIP	
TITLE			DELETE	4.1 T			☐ Change ☐ Addition
NAME				4.21	IAME	.	
STREET ADDRESS				4.3 S	TAEET	ADDRESS	
CITY-ST-ZIP				4.4 0	ITY-S	IT-ZIP	
TITLE	-		DELETE	5.1 T	TLE		☐ Change ☐ Addition
NAME				5.2 N	AME		
STREET ADDRESS				5.3 S	TREET	ADDRESS	
CITY-ST-ZIP						T-ZIP	
TITLE			DELETE	6.1 T		1	☐ Change ☐ Addition
NAME				: 6.2 N			
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP		91 at . 4 .		6.40	ITY-S	T-ZIP	La Continue de COZOVII. Florido Chabeton I freshou postife short the información
i 14. Thereby 0	certify that the information supplied wi	un this fil	ing does not qualify t	or the ex	emp	non stated	in Section 119.07(3)(i), Florida Statutes. I further certify that the information

indicated on this annual report or supplied with this niming does not quality or the exemption stated in Section 119.07(5)(f). Florida Statutes. In their certific the informatic indicated on this annual report or supplied entire the same legal effect as if made under oath; that I am an officer or director of the corporation of 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 or an attrictment with an address.

SIGNATURE:

goewie WPICLAT 4-1-