

V70045

Requester's Name

City/State

KIDS ACADEMY
200 South State Rd. 7
Margate, FL 33068
(305) 972-7574 / 972-7577

400004375744--8
-06/07/01--01079--001
*****35.00 *****35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

01 JUN '77 AM 9:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

- | | | |
|-----------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Walk in | <input type="checkbox"/> Pick up time | <input type="checkbox"/> Certified Copy |
| <input type="checkbox"/> Mail out | <input type="checkbox"/> Will wait | <input type="checkbox"/> Photocopy |
| | | <input type="checkbox"/> Certificate of Status |

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

ADA Harge
6-15-01
pm

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED
AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,
the undersigned corporation organized under the laws of the State of FL
submits the following statement in order to change its registered office or registered agent, or both, in
the State of Florida.

1. The name of the corporation : BO-NI INC
2. The mailing address of the corporation : 200 S. STATE ROAD 7
MARGATE FL 33068
3. Date of incorporation/qualification: OCT 9, 1992 Document number: V70045
4. The name and address of the current registered agent and office:

JOSEPH SCHWARTZ
4040 SHERIDAN ST.
HOLLYWOOD, FL 33021

5. The name and address of the new registered agent (if changed) and/or registered office (if changed)
(P. O. Box Not Acceptable)

JAMES R. McGLYNN
9600 W. SAMPLE RD STE 507
CORAL SPRINGS FL 33066

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TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

Robert Ricci
(Signature of an officer, chairman or vice chairman of the board)

6/1/91
(Date)

ROBERT RICCI PRESIDENT
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

[Signature]
(Signature of Registered Agent)

6-1-91
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

***** FILING FEE: \$35.00 *****