2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2015
Secretary of State
CC7821385514

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Entity Name: AMIKIDS WINGS SOUTH FLORIDA, INC.

Current Principal Place of Business:

5915 BENJAMIN CENTER DRIVE
TAMPA, FL 33634

Current Mailing Address:

AMIKIDS, INC.
5915 BENJAMIN CENTER DRIVE
TAMPA, FL 33634

FEI Number: 20-0954347

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HULL, DAVID
225 WATER ST., STE. 1800
JACKSONVILLE, FL 32202 US

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

Officer/Director Detail :

Title	D
Name	PRIESTLY, JENNY
Address	10332 SW 173RD TERRACE
City-State-Zip:	MIAMI FL 33157

Title	P
Name	LAMBERT, LYNDALL
Address	701 BRICKELL AVENUE, SUITE 3000
City-State-Zip:	MIAMI FL 33131

Title	C
Name	SANCHEZ-MEDINA, ROLAND
Address	201 ALHAMBRA CIRCLE 1205
City-State-Zip:	CORAL GABLES FL 33134

Title	D
Name	STANDER, O. B.
Address	5915 BENJAMIN CENTER DR.
City-State-Zip:	TAMPA FL 33634

Title	D
Name	JOHNSON, MICHELLE
Address	1111 SW 1ST AVENUE, UNIT #1424
City-State-Zip:	MIAMI FL 33130

Title	T
Name	MORTON, LIZ
Address	100 SE 2ND STREET 2311
City-State-Zip:	MIAMI FL 33131

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: O.B. STANDER DIRECTOR 04/28/2015

Electronic Signature of Signing Officer/Director Detail — Date