## 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K27530

Entity Name: FANTASYLAND DAY CARE CENTER CORP.

FILED
Mar 16, 2016
Secretary of State
CC1346894697

# **Current Principal Place of Business:**

9600 SW 8TH ST SUITE 13 MIAMI, FL 33174

## **Current Mailing Address:**

9600 SW 8TH ST SUITE 13 MIAMI, FL 33174

FEI Number: 65-0086080 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SILVA, AMANDA 14282 SW 23RD LANE SUITE 13 MIAMI, FL 33175 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 P Title VF

NameSILVA, AMANDANameSILVA, ANGEL JAddress14282 SW 23 LANEAddress14282 SW 23RD LANE

City-State-Zip: MIAMI FL 33175 City-State-Zip: MIAMI FL 33175

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

SIGNATURE: ANGEL SILVA VICE PRESIDENT 03/16/2016