

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# M89185

**Entity Name:** PARK-A-TOT DAY CARE CENTER, INC.

**Current Principal Place of Business:**

C/O MICHAEL PELAEZ  
3809 FIG ST.  
TAMPA, FL 33609

**FILED**  
**Feb 09, 2017**  
**Secretary of State**  
**CC4282511465**

**Current Mailing Address:**

C/O MICHAEL PELAEZ  
3809 FIG ST.  
TAMPA, FL 33609

**FEI Number: 59-2946977**

**Certificate of Status Desired: Yes**

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

PELAEZ, MICHAEL  
3809 FIG STREET  
TAMPA, FL 33609 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	DP	Title	DST
Name	PELAEZ, MICHAEL	Name	PELAEZ, OLIVIA G
Address	3809 FIG ST.	Address	3809 FIG ST.
City-State-Zip:	TAMPA FL	City-State-Zip:	TAMPA FL

*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: MICHAELPELAEZ**

**PRESIDENT**

**02/09/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date