## 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.

CO-OWNER

SIGNATURE: FRANCISCO DELGADO

Electronic Signature of Signing Officer/Director Detail

# **Current Mailing Address:**

**Current Principal Place of Business:** 

DOCUMENT# P99000018900

11316 SW 88 TERR MIAMI. FL 33176

MIAMI, FL 33176

10095 N. KENDALL DR., #101

### FEI Number: 65-0910703

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

DELGADO, MARIA E 11316 SW 88 TR. MIAMI, FL 33176 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

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: VICTORIA'S PLAYHOUSE DAY CARE & PRE-K, INC.

## **Officer/Director Detail :**

Title	MRS.	Title	DR.
Name	DELGADO, MARIA E	Name	DELGADO, FRANCISCO
Address	11316 SW 88 TR.	Address	11316 SW 88 TR.
City-State-Zip:	MIAMI FL 33176	City-State-Zip:	MIAMI FL 33176

Certificate of Status Desired: No

Date

03/27/2013 Date