

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001018

FILED
Feb 13, 2012
Secretary of State

Entity Name: ALPHABEST EDUCATION, INC.

Current Principal Place of Business:

1310 LEWISVILLE-CLEMMONS ROAD
LEWISVILLE, NC 27023

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 609
LEWISVILLE, NC 270230609

New Mailing Address:

FEI Number: 20-2042559

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: KAPLAN, HAL
Address: 1310 LEWISVILLE-CLEMMONS ROAD
City-St-Zip: LEWISVILLE, NC 27023

Title: VPD
Name: MARCERON, MATTHEW B
Address: 1310 LEWISVILLE-CLEMMONS ROAD
City-St-Zip: LEWISVILLE, NC 27023

Title: ST
Name: HARPER, MELISSA
Address: 1310 LEWISVILLE-CLEMMONS ROAD
City-St-Zip: LEWISVILLE, NC 27023

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: MELISSA HARPER

ST

02/13/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date