## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000005144

Entity Name: MIAMI BEACH EDUCATION FOLINDATION INC.

FILED Sep 15, 2006 Secretary of State

y	INC. IVIII VIIII BEX CELL EBOOK THOLET COLLECT	1014, 1140.		
Current P	rincipal Place of Business:	New Princ	New Principal Place of Business:	
1111 LINC	OFFICE OF S. DAVID SHEFFMAN OLN RD., #400 ACH, FL 33139			
Current Mailing Address:		New Maili	New Mailing Address:	
PO BOX 4 MIAMI BEA	03226 ACH, FL 33140			
In accordan	: 31-1735967 FEI Number Applied For ( ) ce with s. 607.193(2)(b), F.S., the corporation did no		e.	
Name and	Address of Current Registered Agent:	Name and	Address of New Registered Agent:	
1111 LINC	N, S. DAVID OLN RD., #400 ACH, FL 33139 US			
	named entity submits this statement for the peof Florida.	ourpose of changing i	ts registered office or registered agent, or both,	
SIGNATUR	RE:			
	Electronic Signature of Registered Age	ent	Date	
OFFICERS	S AND DIRECTORS:	ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( ) Delete COLLER, LESLIE 5301 LAGROCE DR. MIAMI BEACH, FL 33139	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition COLLER, LESLIE 5301LA GORCE DR. MIAMI BEACH, FL 33139	
Title: Name: Address: City-St-Zip:	D ( ) Delete GROFF, SHELLY PO BOX 403226 MIAMI BEACH, FL 33140	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete RAMOS, KATE PO BOX 403226 MIAMI BEACH, FL 33140	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete GLODE, LISA MARIE 5333 COLLINS AVE #608 MIAMI BEACH, FL 33140	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition BLAKEMAN, KATHRYN PO BOX 403226 MIAMI BEACH, FL 33140	
Title: Name: Address: City-St-Zip:	D ( ) Delete HOWARD, ELSIE 4825 LAKEVIEW DR MIAMI BEACH, FL 33140	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition TANDY, HEIDI 4825 LAKEVIEW DR MIAMI BEACH, FL 33140	
Title: Name: Address: City-St-Zip:	D () Delete TANDY, HEIDI 2630 FLANIGO DR MIAMI BEACH, FL 33140	Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition HOWARD, ELSIE PO BOX 403226 MIAMI BEACH, FL 33140	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LESLIE COLLER DIR 09/15/2006