

2004 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

04-12-2004 90284 026 ****61.25

FILE NO N03000002152

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N03000002152 1. Entity Name SOMERSET ACADEMY HIGH SCHOOL, INC.					
Principal Place of Business 6255 BIRD ROAD MIAMI, FL 33155			Mailing Address 6255 BIRD ROAD MIAMI, FL 33155		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 65-0770346	
5. Certificate of Status Desired ☐				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent AULUETA, IGNACIO G 6255 BIRD ROAD MIAMI, FL 33155				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)					
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ABELLO, ALEJANDRA S 6255 BIRD ROAD MIAMI, FL 33155	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEUTSCH, PETER 6255 BIRD ROAD MIAMI, FL 33155	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUIFANG SU, ANGIE 2150 ARECA PALM RD. BOCA RATON, FL 33432	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JACOBY, RUTH 6255 BIRD ROAD MIAMI, FL 33155	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		D Lagavie Woodward 6255 Bird Road, Miami, FL 33155			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☒ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.					
SIGNATURE: <i>M. Fussen</i> Magdalena Fussen 4/8/04 (305) 6642906					