

2004 NON-PROFIT CORPORATION AMENDED ANNUAL REPORT

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FILED

04 SEP -9 PM 4:27

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			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 65-0770346	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
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 _____				800040939048	
Signature, typed or printed name of registered agent and title if applicable.				(NOTE: Registered Agent signature required when reinstating) DATE	
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D	☒ Delete	TITLE	D	☐ Change ☒ Addition
NAME	ABELLO, ALEJANDRA S		NAME	Dopico, Susie	
STREET ADDRESS	6255 BIRD ROAD		STREET ADDRESS	14301 SW 42nd Street	
CITY-ST-ZIP	MIAMI, FL 33155		CITY-ST-ZIP	Miami, FL 33175	
TITLE	D	☐ Delete	TITLE	D	☐ Change ☒ Addition
NAME	HUIFANG SU, ANGIE		NAME	Jacquinet, Alejandra Sallma	
STREET ADDRESS	2150 ARECA PALM RD.		STREET ADDRESS	4475 Nautilus Drive	
CITY-ST-ZIP	BOCA RATON, FL 33432		CITY-ST-ZIP	Miami Beach, Florida 33140	
TITLE	D	☐ Delete	TITLE	P	☒ Change ☐ Addition
NAME	JACOBY, RUTH		NAME	Jacoby, Ruth	
STREET ADDRESS	6255 BIRD ROAD		STREET ADDRESS	12425 SW 53rd Street	
CITY-ST-ZIP	MIAMI, FL 33155		CITY-ST-ZIP	Miramar, Florida 33027	
TITLE	D	☐ Delete	TITLE	VP	☐ Change ☒ Addition
NAME	WOODWARD, LAGARIE		NAME	Montero, Bernardo	
STREET ADDRESS	% 6255 BIRD ROAD		STREET ADDRESS	20805 Johnson Street	
CITY-ST-ZIP	MIAMI, FL 33155		CITY-ST-ZIP	Pembroke Pines, Florida 33029	
TITLE		☐ Delete	TITLE	VP	☐ Change ☒ Addition
NAME			NAME	Sadesky, Shannie	
STREET ADDRESS			STREET ADDRESS	20801 Johnson Street	
CITY-ST-ZIP			CITY-ST-ZIP	Pembroke Pines, Florida 33025	
TITLE		☐ Delete	TITLE	VP	☐ Change ☒ Addition
NAME			NAME	Taibi, Anthony	
STREET ADDRESS			STREET ADDRESS	20803 Johnson Street	
CITY-ST-ZIP			CITY-ST-ZIP	Pembroke Pines, Florida 33029	
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: <u>Dr. Ruth Jacoby</u> Date: <u>9/8/04</u> (305) 669-2906					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

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SOMERSET ACADEMY HIGH SCHOOL, INC.

ADDITIONAL OFFICERS AND DIRECTORS:

Title: S
Name: Linaje, Kelly Mallon
Street Address: 6255 Bird Road
City-St-Zip: Miami, Florida 33155

Title: T
Name: Miller, Dina
Street Address: 3788 Davie Road
City-St-Zip: Davie, Florida 33314



CORPORATION SERVICE COMPANY

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ACCOUNT NO. : 072100000032

REFERENCE : 870034 131879A

AUTHORIZATION :

COST LIMIT : \$ 61.25

Patricia Pigute

ORDER DATE : August 31, 2004

ORDER TIME : 3:36 PM

ORDER NO. : 870034-030

CUSTOMER NO: 131879A

CUSTOMER: Ms. Annette Frances
Ignacio G. Zulueta, P.a.
Suite 3-i
6255 Bird Road
Miami, FL 33155

ANNUAL REPORT FILING

NAME: SOMERSET ACADEMY HIGH SCHOOL,
INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Justin Cheshire-EXT#2909

EXAMINER'S INITIALS: _____

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04 SEP - 9 PM 4:08
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA