

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008967

FILED
Feb 06, 2008
Secretary of State

Entity Name: ADVANTAGE ACADEMY OF MIAMI, INC.

Current Principal Place of Business:

4300 N. UNIVERSITY DRIVE
SUITE C 201
SUNRISE, FL 33351

New Principal Place of Business:

Current Mailing Address:

4300 N. UNIVERSITY DRIVE
SUITE C 201
SUNRISE, FL 33351

New Mailing Address:

FEI Number: 20-3878749

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRADER, MICHAEL G.
10320 NW 6TH STREET
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

STRADER, MICHAEL G.
4300 N. UNIVERSITY DRIVE
SUITE C-201
SUNRISE, FL 33351 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:

02/06/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: GRASCH, NATHANIEL
Address: 1400 E. NEWPORT CENTER DRIVE
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: VC () Delete
Name: SCOTT, JOHN
Address: 200 S. BISCAYNE BOULEVARD, SUITE 280
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: DEL MONTE, HELENA
Address: 3680 SW 18TH TERRACE
City-St-Zip: MIAMI, FL 33145

Title: D () Delete
Name: ISKANDARANI, BASSEMA
Address: 4803 COCONUT CREEK PARKWAY
City-St-Zip: COCONUT CREEK, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: GRASCH, NATHANIEL
Address: 4300 N. UNIVERSITY DRIVE SUITE C-201
City-St-Zip: SUNRISE, FL 33351

Title: VC (X) Change () Addition
Name: SCOTT, JOHN
Address: 4300 N. UNIVERSITY DRIVE SUITE C-201
City-St-Zip: SUNRISE, FL 33351

Title: D (X) Change () Addition
Name: DEL MONTE, HELENA
Address: 4300 N. UNIVERSITY DRIVE SUITE C-201
City-St-Zip: SUNRISE, FL 33351

Title: D (X) Change () Addition
Name: ISKANDARANI, BASSEMA
Address: 4300 N. UNIVERSITY DRIVE SUITE C-201
City-St-Zip: SUNRISE, FL 33351

I hereby certify that the information supplied with this filing does not qualify 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: NATHANIEL GRASCH

C

02/06/2008

Electronic Signature of Signing Officer or Director

Date