

2001 UNIFORM BUSINESS REPORT (UBR)

5/

FILED
May 30, 2001 8:00 am
Secretary of State

05-10-2001 90102 011 ***150.00

DOCUMENT # P00000071300

1. Entity Name

EDUCATIONAL BEGINNINGS, INC.

Principal Place of Business

Mailing Address

400 N W 136TH AVENUE
 MIAMI FL 33182

400 N W 136TH AVENUE
 MIAMI FL 33182

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

65-1027204

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MOLANO PERMIN, EVANGELINA
400 N W 136TH AVENUE
MIAMI FL 33182

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME **President**
 STREET ADDRESS **Manuel E Fermin**
 CITY-ST-ZIP **934 Michigan Ave. #201**
Miami Beach, FL 33139-4825

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE ☐ Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
 NAME **Vice-President**
 STREET ADDRESS **Ivonne Fermin-Andrade**
 CITY-ST-ZIP **14354 SW 90T Terrace**
Miami, FL 33186

TITLE ☐ Change ☒ Addition
 NAME **Vice-President**
 STREET ADDRESS **Sandra Fermin-Lacayo**
 CITY-ST-ZIP **400 NW 136 Avenue**
Miami, FL 33182 1954

TITLE ☐ Change ☒ Addition
 NAME **Vice-President**
 STREET ADDRESS **Mercedes Andrade**
 CITY-ST-ZIP **14215 SW 92 Street**
Miami, FL 33186

TITLE ☐ Change ☒ Addition
 NAME **Vice-President**
 STREET ADDRESS **Evangelina Molano-Fermin**
 CITY-ST-ZIP **400 NW 136 Avenue**
Miami, FL 33182-1954

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)