2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000063709

1. Entity Name

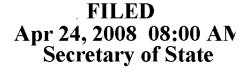
MIAMI INTERNATIONAL UNIVERSITY OF ART & DESIGN, INC.



Principal Place of Business

1501 BISCAYNE BLVD. MIAMI, FL 33132 Mailing Address

C/O EDMC 210 SIXTH AVE. 33RD FLOOR PITTSBURGH, PA 15222





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04182008 No Chg-P CR2E034 (11/05)

4. FEI Number 58-2641065

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

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	e named entity submits this statement for the pations of registered agent.	ourpose of changing	its registe	red office o	registered agent, or b	oth, in the State of Florida. I am familiar with	n, and accept	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered agent).				ed Agent signat	ire required when reinstating)	DATE		
	.E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Camp Trust Fund Co	-		\$5.00 May Be Added to Fees		·	
10. OFFICERS AND DIRECTORS				ř	;			
TITLE	P		•	•		The state of the s	The same of	
NAME	FLEMING, ERIKA			٠,				
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10.	OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MIAMI, FL 33132	
NAME STREET ADDRESS CITY-ST-ZIP	S KRAMER, DEVITT J 210 SIXTH AVE., 33RD FL. PITTSBURGH, PA 15222	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PANNOZZO, DORINDA 210 SIXTH AVE., 33RD FL. PITTSBURGH, PA 15222	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS MINAHAN, SUSAN 210 SIXTH AVE., 33RD FL. PITTSBURGH, PA 15222	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREEN, THOMAS L 1501 BISCAYNE BLVD. MIAMI, FL 33132	
TITLE NAME STREET ADDRESS CITY+ST+ZIP		

000000917615 05/13/08-80049-009 150.00

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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: A

he Augustan Sue Mination
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/08 412-562-0900

Date

Daytime Phone #