2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000024399

219 SW 32ND AVENUE

MIAMI, FL 33135

Address:

City-St-Zip:

Entity Name: EMILY C. MOISES DAY TRAINING CENTER INC.

FILED Mar 28, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 219 SW 32ND AVENUE 5643-R N.W. 36 ST MIAMI, FL 33135 MIAMI, FL 33166 **Current Mailing Address: New Mailing Address:** 219 SW 32ND AVENUE 5643-R N.W. 36 ST MIAMI, FL 33135 MIAMI, FL 33166 FEI Number: 57-1155542 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MOISES, ALBERTO A 219 SW 32ND AVENUE MIAMI, FL 33135 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition MOISES, ALBERTO A Name: Name: 219 SW 32ND AVENUE Address: Address: City-St-Zip: MIAMI, FL 33135 City-St-Zip: Title: VSD Title: () Change () Addition () Delete Name: MOISES, NIEVES I Name:

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALBERTO A. MOISES PTD 03/28/2004