

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000024797

FILED  
Jan 03, 2006  
Secretary of State

**Entity Name:** EDUCATION EVALUATION,TRANSLATION AND JOB RESEARCH, INC.

## Current Principal Place of Business:

13899 BISCAYNE BLV  
PH-12  
MIAMI, FL 33181

## New Principal Place of Business:

13899 BISCAYNE BLV  
400  
MIAMI, FL 33181

## Current Mailing Address:

13899 BISCAYNE BLV  
PH-12  
MIAMI, FL 33181

## New Mailing Address:

13899 BISCAYNE BLV  
400  
MIAMI, FL 33181

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

## Name and Address of Current Registered Agent:

RUIZ, OSCAR A DR  
20425 NE 19 CT  
AVENTURA, FL 33179 US

## Name and Address of New Registered Agent:

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:

Title: P ( ) Delete  
Name: SOTO, SONIA  
Address: 409 W HALLANDALE BEACH BLV-SUITE 216  
City-St-Zip: HALLANADALE, FL 33009 US

Title: VP ( ) Delete  
Name: VERGARA, MARTHA  
Address: 4090 WEST HALLANDALE BEACH BLV-SUITE 216  
City-St-Zip: HALLANDALE, FL 33009 US

Title: VP ( ) Delete  
Name: ORTIZ, NORBY  
Address: 409 WEST HALLANDALE BEACH BLV-SUITE 216  
City-St-Zip: HALLANDALE, FL 33009 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: VERGARA, MARTHA  
Address: 409 W HALLANDALE BEACH BLV-SUITE 216  
City-St-Zip: HALLANADALE, FL 33009 US

Title: VP (X) Change ( ) Addition  
Name: QUEZADA, BETO  
Address: 4090 WEST HALLANDALE BEACH BLV-SUITE 216  
City-St-Zip: HALLANDALE, FL 33009 US

Title: ( ) Change ( ) Addition  
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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARTHA VERGARA

P

01/03/2006

Electronic Signature of Signing Officer or Director

Date