

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000011803

FILED
Jun 22, 2009
Secretary of State

Entity Name: HANDS ON TUTORING CENTER CORP.

Current Principal Place of Business:

15108 SW 140 PLACE
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

P.O BOX 771853
MIAMI, FL 33177

New Mailing Address:

FEI Number: 75-3229873 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIRO, KRISTINE
15108 SW 140 PLACE
MIAMI, FL 33186 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MIRO, SAMUEL
Address: 15108 SW 140 PLACE
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: PARDON, JOSEPH
Address: 17910 SW 137 CT
City-St-Zip: MIAMI, FL 33177

Title: P () Delete
Name: MIRO, KRISTINE
Address: 15108 SW 140 PLACE
City-St-Zip: MIAMI, FL 33186

Title: P () Delete
Name: PADRON, REBECCA
Address: 17910 SW 137 CT
City-St-Zip: MIAMI, FL 33177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KRISTINE MIRO

_____ Electronic Signature of Signing Officer or Director

DIRE

06/22/2009

_____ Date