

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000041602

FILED
Jan 24, 2008
Secretary of State

Entity Name: INSTITUTE FOR PROFESSIONAL STUDIES, INC.

Current Principal Place of Business:

1060 SW 111 WAY
DAVIE, FL 33324

New Principal Place of Business:

6101 BLUE LAGOON DR.
150
MIAMI, FL 33126

Current Mailing Address:

1060 SW 111 WAY
DAVIE, FL 33324

New Mailing Address:

6101 BLUE LAGOON DR.
150
MIAMI, FL 33126

FEI Number: 20-8824098

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REBOLLEDO, ALEJANDRO
1060 SW 111 WAY
DAVIE, FL 33324 US

Name and Address of New Registered Agent:

REBOLLEDO, ALEJANDRO
6101 BLUE LAGOON DR.
150
MIAMI, FL 33126 US

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: ALEJANDRO REBOLLEDO

01/24/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: REBOLLEDO, ALEJANDRO JR
Address: 1060 SW 111 WAY
City-St-Zip: DAVIE, FL 33324

Title: P () Delete
Name: REBOLLEDO, ALEJANDRO
Address: 1060 SW 111 WAY
City-St-Zip: DAVIE, FL 33324

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: REBOLLEDO, ALEJANDRO
Address: 6101 BLUE LAGOON DR.
City-St-Zip: MIAMI, FL 33126

Title: VP (X) Change () Addition
Name: REBOLLEDO, ALEJANDRO ANDRES
Address: 6101 BLUE LAGOON DR.
City-St-Zip: MIAMI, FL 33126

Title: SD () Change (X) Addition
Name: GUERRA, JOSE
Address: 1060 SW 111 WAY
City-St-Zip: DAVIE, FL 33324

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: ALEJANDRO REBOLLEDO

P

01/24/2008

Electronic Signature of Signing Officer or Director

Date