2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000015147

City-St-Zip:

MIAMI, FL 33055

Entity Name: OPEN HEARTS INT'L EDUCATION

FILED Apr 26, 2004 Secretary of State

Entity Na	me: OPEN H	IEARTS INT'L EDUCATION, INC) .		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	KELL BAY DR 11 TOWER III 33131	IVE			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
	KELL BAY DR 11 TOWER III 33131	IVE			
FEI Number	: 65-0812143	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address of	Current Registered Agent:	Name and Address of	lame and Address of New Registered Agent:	
MIAMI, FL The above	184TH TERR. 33055 US		urpose of changing its registered	d office or registered agent, or both,	
SIGNATU					
Electronic Signature of Registered Agent			nt	Date	
Election Car	mpaign Financii	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (NIEVEEN, KIR 5502 NW 184 MIAMI, FL 33	TH TERRACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	•		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	STD (NIEVEEN, JEN 5502 NW 184		Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: JENNY NIEVEEN PD 04/26/2004