


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 18, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # P99000061720

\*1. Entity Name  
ACADEMICA CORPORATION



Principal Place of Business  
6255 BIRD RD.  
MIAMI-DADE, FL 33155

Mailing Address  
6255 BIRD RD.  
MIAMI-DADE, FL 33155

**DO NOT WRITE IN THIS SPACE**



01072004 No Chg-P CR2E034 (10/03)

4. FEI Number  
65-0944595

Applied For  
Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ZULUETA, FERNANDO J  
6255 BIRD RD.  
MIAMI-DADE, FL 33155

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

000000055986  
02/18/04-80031-007 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD ZULUETA, FERNANDO J 6255 BIRD ROAD MIAMI, FL 33155
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VS FRESEN, MAGDALENA 6255 BIRD ROAD MIAMI, FL 33155
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V ZULUETA, IGNACIO G 6255 BIRD ROAD MIAMI, FL 33155
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T WRIGHT, ROSANNE 6255 BIRD ROAD MIAMI, FL 33155
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Fernando Zulueta Date: 2/16/04 Daytime Phone #: (305) 669-2906

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR