2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT
DOCUMENT\# N16000005098
Entity Name: OLYMPUS INTERNATIONAL ACADEMY INC.
FILED
Jan 17, 2018
Secretary of State CC6337888135

## Current Principal Place of Business:

1645 THE 12TH FAIRWAY
WELLINGTON, FL 33414

## Current Mailing Address:

1645 THE 12TH FAIRWAY
WELLINGTON, FL 33414 US

## FEI Number: APPLIED FOR

Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MULLEN, JOSEPH F
2450 HOLLYWOOD BVD
S
HOLLYWOOD, FL 33020 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:

## Officer/Director Detail :

| Title | P | Title | SEC |
| :---: | :---: | :---: | :---: |
| Name | MARTINS, CRISTIANE | Name | ZINNER, LEA |
| Address | 1645 THE 12TH FAIRWAY | Address | 1645 THE 12TH FAIRWAY |
| City-State-Zip: | WELLINGTON FL 33414 | City-State-Zip: | WELLINGTON FL 33414 |
| Title | D | Title | T |
| Name | CARIELLO, BEATRIZ | Name | CARNEIRO, PATRICIA |
| Address | 1645 THE 12TH FAIRWAY | Address | 1645 THE 12TH FAIRWAY |
| City-State-Zip: | WELLINGTON FL 33414 | City-State-Zip: | WELLINGTON FL 33414 |
| Title | D | Title | D |
| Name | SCHNEIDER, GILDA | Name | FEHRIBACH, CLAUDIA V M |
| Address | 1645 THE 12TH FAIRWAY | Address | 1645 THE 12TH FAIRWAY |
| City-State-Zip: | WELLINGTON FL 33414 | City-State-Zip: | WELLINGTON FL 33414 |
| Title | V |  |  |
| Name | PEREZ, ANDENAURA |  |  |
| Address | 1645 THE 12TH FAIRWAY |  |  |
| City-State-Zip: | WELLINGTON FL 33414 |  |  |

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.
SIGNATURE: LEA ZINNER
RA

