

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N19000001887

**Entity Name:** NATIONAL EDUCATION EQUITY LAB, INC.

**Current Principal Place of Business:**

648 BROADWAY  
SUITE 603  
NEW YORK, NY 10012

**Current Mailing Address:**

725 PONCE DE LEON AVE NE  
WEWORK C/O ALEXANDRA SLACK  
ATLANTA, GA 30306 US

**FEI Number: 83-3914379**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CORNFELD, JEFFREY  
3850 HOLLYWOOD BOULEVARD  
SUITE 400  
HOLLYWOOD, FL 33021 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D  
Name CORNFELD, LESLIE  
Address 1220 PARK AVE.  
City-State-Zip: NEW YORK NY 10128

Title D  
Name WOLFE, MELINDA  
Address 60 E. 42ND ST., 3RD FLOOR  
City-State-Zip: NEW YORK NY 10165

Title D  
Name HUROWITZ, SUSANNE  
Address 16701 COLLINS AVE.  
City-State-Zip: SUNNY ISLES BEACH FL 33019

*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: LESLIE CORNFELD**

**CHIEF EXECUTIVE  
OFFICER**

**01/31/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date