

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000013661

**Entity Name:** JEFFERSON ACADEMY, INC.

**Current Principal Place of Business:**

1643 BRICKELL AVE #901  
MIAMI, FL 33129

**Current Mailing Address:**

1643 BRICKELL AVE #901  
MIAMI, FL 33129

**FEI Number: 65-1015257**

**Certificate of Status Desired: No**

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

FARRA, MIGUEL G  
1450 BRICKELL AVENUE  
18TH FLOOR  
MIAMI, FL 33131 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 P  
Name SAIDEN, AMIN  
Address 1643 BRICKELL AVE, APT 2305  
City-State-Zip: MIAMI FL 33129

Title T  
Name SAIDEN, SILVIA A  
Address 1643 BRICKELL AVE, APT 2305  
City-State-Zip: MIAMI FL 33129

Title S  
Name SAIDEN, SILVIA  
Address 1643 BRICKELL AVE, APT 901  
City-State-Zip: MIAMI FL 33129

Title D  
Name SUCRE, VERONICA  
Address 1639 MICANOPY AVE  
City-State-Zip: COCONUT GROVE FL 33133

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: SAIDEN , AMIN**

**DIRECTOR**

**03/23/2013**

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

\_\_\_\_\_  
Date