

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000068056

Entity Name: INNOVA COLLEGE VIRTUAL CAMPUS, INC.**Current Principal Place of Business:**703 NW 62 AVE
SUITE 210
MIAMI, FL 33126**Current Mailing Address:**703 NW 62 AVE
SUITE 210
MIAMI, FL 33126**FEI Number:** 80-0226377**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MILLER, BROOKS C
200 SOUTH BISCAYNE BOULEVARD
SUITE 4300
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	D, CEO
Name	MALDONADO VILLASENOR, ERICH R
Address	2240 ALMEDA
City-State-Zip:	SANTIAGO CENTRO SANTIAGO XX XX

Title	D
Name	GIORDANO COVARRUBIAS, RUBEN
Address	2240 ALAMEDA
City-State-Zip:	SANTIAGO CENTRO SANTIAGO XX XX

Title	D, PRESIDENT
Name	VARELA NOGUERA, FRANCISCO
Address	ISIDORA GOYENECHEA NO 3120 PISO 8
City-State-Zip:	LOS CONDES SANTIAGO XX XX

Title	D
Name	SALAME, RENE
Address	2240 ALAMEDA
City-State-Zip:	SANTIAGO CENTRO SANTIAGO XX XX

Title	COO
Name	HERANE, MARIO
Address	3242 SW 16TH TERRACE
City-State-Zip:	FORT LAUDERDALE FL 33315

Title	D, SECRETARY
Name	CORTES, CRISTIAN
Address	2240 ALAMEDA
City-State-Zip:	SANTIAGO CENTRO SANTIAGO XX XX

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: MARIO HERANE**SECRETARY****03/29/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date