

2014 FLORIDA PROFIT CORPORATION AMENDED 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, PRESIDENT, CEO
Name MALDONADO VILLASENOR, ERICH R
Address 2240 ALAMEDA
City-State-Zip: SANTIAGO CENTRO XX XX

Title D
Name MCCULLOUGH, LARRY
Address 912 KABLE CIRCLE
City-State-Zip: NASHVILLE TN 37211

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

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

Title D, VP, SECRETARY
Name HERANE, MARIO
Address 703 NW 62 AVE
SUITE 210
City-State-Zip: MIAMI FL 33126

Title D
Name SOTO, PATRICIO
Address AV. AMERICO VESPUCIO 357
City-State-Zip: LAS CONDES 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

D, SECRETARY, VP

06/26/2014

Electronic Signature of Signing Officer/Director Detail_____
Date