

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12000005153

Entity Name: PARALEGAL INSTITUTE OF SOUTH FLORIDA, INC

Current Principal Place of Business:

2655 LE JEUNE ROAD
SUITE 403
CORAL GABLES, FL 33134

Current Mailing Address:

2655 LE JEUNE ROAD
SUITE 403
CORAL GABLES, FL 33134

FEI Number: 45-4559676

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PULIDO ALFANO, JOHANNA
2655 LE JEUNE ROAD
403
CORAL GABLES, FL 33134 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 CASTELLARES, DORA
Address 2655 LE JEUNE ROAD SUITE 403
City-State-Zip: CORAL GABLES FL 33143

Title VP
Name PULIDO ALFANO, JOHANNA
Address 2655 LE JEUNE ROAD #403
City-State-Zip: CORAL GABLES FL 33134

Title SEC
Name ALFANO, ALEXANDER
Address 2655 LE JEUNE ROAD SUITE 403
City-State-Zip: CORAL GABLES FL 33143

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: JOHANNA PULIDO ALFANO

VP

03/20/2014

Electronic Signature of Signing Officer/Director Detail

Date