

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12000079801

**FILED**  
**Jan 13, 2014**  
**Secretary of State**  
**CC3386033594**

**Entity Name:** CELEBRATION LANGUAGE INSTITUTE INC

**Current Principal Place of Business:**

6735 CONROY WINDERMERE RD STE 319  
ORLANDO, FL 32835

**Current Mailing Address:**

6735 CONROY WINDERMERE RD STE 319  
ORLANDO, FL 32835

**FEI Number: 46-1039387**

**Certificate of Status Desired: Yes**

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

RANGEL , GUSTAVO B  
6735 CONROY WINDERMERE RD STE 319  
ORLANDO, FL 32835 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:** GUSTAVO RANGEL

01/13/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name SILVA, MEIRE D  
Address 6735 CONROY WINDERMERE ROAD  
STE 319  
City-State-Zip: ORLANDO FL 32835

Title S  
Name DA SILVA, AMYLTO R  
Address 6735 CONROY WINDERMERE ROAD  
STE 319  
City-State-Zip: ORLANDO FL 32835

Title T  
Name SILVA, ANNA L  
Address 6735 CONROY WINDERMERE ROAD  
STE 319  
City-State-Zip: ORLANDO FL 32835

*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:** MEIRE D SILVA

**DIRECTOR**

01/13/2014

Electronic Signature of Signing Officer/Director Detail

Date