

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P17000030641

**Entity Name:** FLEX MAJOR SCHOOL, INC

**Current Principal Place of Business:**

2295 S HIAWASSEE RD  
STE 104  
ORLANDO, FL 32835

**Current Mailing Address:**

2295 S HIAWASSEE RD  
STE 104  
ORLANDO, FL 32835 US

**FEI Number:** 82-1129203

**Certificate of Status Desired:** No

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

OGC ASSOCIATES ORLANDO CORP  
6965 PIAZZA GRANDE AVENUE,  
SUITE 309  
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:** ODIJAS CAMINHA

02/23/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title AMBR  
Name DE ALMEIDA NETO, ANTONIO M  
Address 6031 MCMURRAY AVENUE  
City-State-Zip: BURNABY BRITISH COLUMBIA V5H 0J6

Title AMBR  
Name GLN EDU CONSULTING LLC  
Address 4421 NE 27TH AVE  
City-State-Zip: LIGHTHOUSE POINT FL 33064

Title AMBR  
Name PIERALISI FRAGA NETTO, DANIELA  
Address RUA ALAMEDA LOUVEIRA 338 ALPHAVILLE 2  
City-State-Zip: LONDRINA PR 86055-784

Title AMBR  
Name BERNARDINO VARGAS, DEBORA  
Address AV VOLUNTARIOS DA PATRIA 546 AP 604  
City-State-Zip: LONDRINA PR 86061-120

Title AMBR  
Name HERNAN MEDEIROS QUARESMA, EDNEY  
Address TV FLORIANO PEIXOTO 2503  
City-State-Zip: CASTANHAL PA 68743-030

Title AMBR  
Name TORRES DINIZ, PAULO RICARDO  
Address AV DUQUE DE CAXIAS 1726/513  
City-State-Zip: LONDRINA PR 86010-190

*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:** DE ALMEIDA NETO, ANTONIO M

AMBR

02/23/2023

Electronic Signature of Signing Officer/Director Detail

Date