I hereby certify that the information indicated on this report or supplemental report is true and acc		
oath; that I am an officer or director of the corporation or the receiver or trustee empowered to ex	ecute this report as required by Chapter 617, Flori	da Statutes; and that my name appears
above, or on an attachment with all other like empowered.		
SIGNATURE [,] BEN PAUI	CEO	04/07/2017

City-State-Zip: LO	S ANGELES	CA	90036
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Name	KEYS, TOM	Name	GALER, SCOTT
Address	5670 WILSHIRE BLVD, SUITE 620	Address	15260 VENTURA BLVD,20TH FLOOR
City-State-Zip:	LOS ANGELES CA 90036	City-State-Zip:	SHERMAN OAKS CA 91403
Title	т	Title	D
Name	DIMAGGIO, LAURA	Name	WACHTER, PAUL
Address	10960 WILSHIRE BLVD, 5TH FL	Address	3110 AIN ST., STE 301
Citv-State-Zip:	LOS ANGELES CA 90024	City-State-Zip:	SANTA MONICA CA 90405

Title

Title

Name

Address

City-State-Zip:

PD

S

PAUL, BEN

5670 WILSHIRE BLVD, SUITE 620

LOS ANGELES CA 90036

O

С

D

SIGNATURE: BEN PAUL

WACHTER, PAUL

3110 MAIN STREET

SANTA MONICA CA 90405

·		
The above named e	ntity submits this statement for the purpose of changing its registered office or registered agent, or bo	oth, in the State of Florida.
SIGNATURE:	MICHAEL BROWN	04
	Electronic Signature of Registered Agent	
Officer/Direct	or Detail :	

Name and Address of Current Registered Agent:

Entity Name: AFTER-SCHOOL ALL-STARS CORPORATION

2017 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

5670 WILSHIRE BLVD, SUITE 620 LOS ANGELES, CA 90036

DOCUMENT# F1500002367

Current Mailing Address:

5670 WILSHIRE BLVD, SUITE 620 LOS ANGELES, CA 90036

FEI Number: 95-4441208

BROWN, MICHAEL 3402 W. COLUMBUS DR. TAMPA, FL 33607 US

Title

Title

Name

Address

City-State-Zip:

FILED Apr 07, 2017 Secretary of State CC6110645713

> 04/07/2017 Date

Certificate of Status Desired: No

Date

Electronic Signature of Signing Officer/Director Detail

CEO