

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001018

Entity Name: ALPHABEST EDUCATION, INC.

Current Principal Place of Business:

1310 LEWISVILLE-CLEMMONS ROAD
LEWISVILLE, NC 27023

Current Mailing Address:

POST OFFICE BOX 609
LEWISVILLE, NC 27023-0609

FEI Number: 20-2042559

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 KAPLAN, HAL
Address 1310 LEWISVILLE-CLEMMONS ROAD
City-State-Zip: LEWISVILLE NC 27023

Title VPD
Name MARCERON, MATTHEW B
Address 1310 LEWISVILLE-CLEMMONS ROAD
City-State-Zip: LEWISVILLE NC 27023

Title ST
Name HARPER, MELISSA
Address 1310 LEWISVILLE-CLEMMONS ROAD
City-State-Zip: LEWISVILLE NC 27023

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: MELISSA HARPER

DIRECTOR OF BUSINESS AND FINANCE 01/23/2014

Electronic Signature of Signing Officer/Director Detail

_____ Date