

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 508179

FILED  
Jan 03, 2012  
Secretary of State

**Entity Name:** MONTESSORI CHILDRENS HOUSE, INC.

**Current Principal Place of Business:**

12985 SW 112TH STREET  
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

12985 SW 112TH STREET  
MIAMI, FL 33186

**New Mailing Address:**

**FEI Number:** 59-1686947

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SAMUELSON, MELANIE  
13595 S.W. 114 TERRACE  
MIAMI, FL 33186 US

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

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

**OFFICERS AND DIRECTORS:**

Title: V  
Name: SAMUELSON, JAY D  
Address: 9824 SW 134 CT  
City-St-Zip: MIAMI, FL 33186

Title: P  
Name: SAMUELSON, MELANIE  
Address: 13595 SW 114 TERR  
City-St-Zip: MIAMI, FL 33186

Title: TREA  
Name: SAMUELSON, BRIAN J  
Address: 3626 SAN SIMEON CIRCLE  
City-St-Zip: WESTON, FL 33331

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: MELANIE SAMUELSON

PRES

01/03/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date