

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 645168

FILED  
Apr 03, 2006  
Secretary of State

**Entity Name:** MIELE INTERNATIONAL SCHOOLS OF LANGUAGES, INC.

**Current Principal Place of Business:**

4757 BAYVIEW DRIVE  
DAUDERDALE BY THE SEA, FL 33308 US

**New Principal Place of Business:**

4757 BAYVIEW DRIVE  
FORT LAUDERDALE, FL 33308 US

**Current Mailing Address:**

4757 BAYVIEW DRIVE  
DAUDERDALE BY THE SEA, FL 33308 US

**New Mailing Address:**

4757 BAYVIEW DRIVE  
FORT LAUDERDALE, FL 33308 US

**FEI Number:** 59-1953122

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MIELE, LOUIS DR.  
4751 BAYVIEW DRIVE  
FORT LAUDERDALE, FL 33308 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MIELE, LOUIS (DR.),  
Address: 4751 BAYVIEW DRIVE  
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: VP ( ) Delete  
Name: MIELE, MICHELLE  
Address: 4751 BAYVIEW DRIVE  
City-St-Zip: FORT LAUDERDALE, FL 33308

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

**SIGNATURE:** MIELE, LOUIS (DR.)

PRES

04/03/2006

Electronic Signature of Signing Officer or Director

Date