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Change

☐ Addition

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200	1 UNIFORM BUSIN	R)	FILED				
DOCU	MENT # 737014	Sep Se	Sep 05, 2001 8:00 am Secretary of State				
FREED	OM LEARNING CENTER, INC.				9-05-2001 90027 028		
•				/ Bl			
Principal Pla	ce of Business	Mailing Address					
1933 N.E. 16 North Mian US	II BCH FL 33162	1933 n.e. 163 street North Miami BCH FL 3316 Us	(52				
2. Principal I	Place of Business 11 BISCAYNE BLVD 3	. Mailing Address	TYNE BL				
Suite, Apt	. #, etc.	Suite, Apt. #, etc.	HYNE DI	-VD ·	DO NOT WRITE IN THIS SP	PACE	
City & Sta	UTURA, PL	AVENTURA,	PL	4. FEI Number	59-1753790	Applied For Not Applicable	}
33/ <i>(</i>			V ^{Country}	5. Certificate of St	F	8.75 Additional ee Required	
	6. Name and Address of Current Regi	Istered Agent	Name	7. Name and Add	Iress of New Registered Ag	gent	
	DUIS Quayside City Fl 33180		Street A	Address (P.Q. Box Number is	Not Acceptable)	VEW ADDRESS)	
OOO! LII	011112 00100		City	EMBRAYE DIA	les FL	Zip Code 330>8	
	Signature, typed or printed name of registered agent and titl FILE NOW: FEE IS \$61.25 ember 12, 2001, min. will be \$236.2	9. Election Camp	aign Financing	ture required when reinstating) \$5.00 May Be Added to Fees	Make Check I Department	•	
10.	OFFICERS AND DIRECT	ORS /	11.	ADDITIONS/CHANG	ES TO OFFICERS AND DIRE	CTORS IN 10	
TITLE	D	Delete	TITLE			☐ Change ☐ Addition	<u>6</u>
NAME STREET ADDRESS CITY-ST-ZIP	PACE, ANN 16558 NE 26TH AVENUE #2G NO. MIAMI BEACH FL 33160	ı	NAME STREET ADDRESS CITY-ST-ZIP				CR2E037 (5/01)
TITLE NAME STREET ADDRESS	PD RUTHERFORD, JOANN 3615 NE 167 ST. #204	☐ Delete	TITLE NAME STREET ADDRESS	16558 N.E.		Change	CR
CITY-ST-ZIP	NO. MIAMI BEACH FL 33160		CITY-ST-ZIP	No MIAMI B	158 N.E. 26th ANE, #35 MIAMI BEACH, FL 33160		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CARUSO, JOANN 942 NE 199 ST #205 NO. MIAMI BEACH FL 33179	☐ Delete ——	NAME STREET ADDRESS CITY-ST-ZIP	Chang Lister and arrival Compilers	- Comment of the second of the	l*Chánge ´~	₹,
TITLE NAME STREET ADDRESS CITY ST. 7/B	DT Zwerner, Mila 16570 ne 26th Avenue #6A	☐ Delete	TITLE NAME STREET ADDRESS		[☐ Change ☐ Addition	
CITY-ST-ZIP TITLE NAME	N MIAMI BEACH FL 33160 S CARUSO, JOANN	☐ Delete	CITY-ST-ZIP TITLE NAME			☐ Change ☐ Addition	
STREET ADDRESS CITY-ST-ZIP	942 NE 199 ST. #205 NO. MIAMI BEACH FL 33179		STREET ADDRESS				

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

£π

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP