

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756019

FILED
May 27, 2004
Secretary of State**Entity Name:** THE INTERNATIONAL CENTER FOR EDUCATION AND HUMAN DEVELOPMENT, INC.**Current Principal Place of Business:**1724 MIDDLE RIVER DRIVE
FORT LAUDERDALE, FL 333053534 US**New Principal Place of Business:****Current Mailing Address:**1724 MIDDLE RIVER DRIVE
FORT LAUDERDALE, FL 333053534 US**New Mailing Address:****FEI Number:** 65-0112529**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SMITH, FLORENCE
1724 MIDDLE RIVER DRIVE
FORT LAUDERDALE, FL 333053534 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:** PD () Delete
Name: NIMNIGHT, GLEN,
Address: CARRERA 7 A # 69-59
City-St-Zip: BOGOTA, CO**Title:** STD () Delete
Name: SMITH, FLORENCE,
Address: 1724 MIDDLE RIVER DRIVE
City-St-Zip: FORT LAUDERDALE, FL 333053534**Title:** VD () Delete
Name: FISCHLER, ABRAHAM,
Address: 3301 COLLEGE AVE.
City-St-Zip: FT. LAUDERDALE, FL**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**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 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GLEN NIMNIGHT

PD

05/27/2004

Electronic Signature of Signing Officer or Director

Date