2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# 756019

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 ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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:	ARANGO CARDENAS, SAN, DRA	
Address:	1634 ORCHI BEND	
City-St-Zip:	WESTON, FL 33327	
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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANDRA ARANGO CARDENAS PD 05/01/2006

Electronic Signature of Signing Officer or Director — Date