2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 22, 2008
Secretary of State

DOCUMENT# 757048

Entity Name: COUNCIL OF BILINGUAL SCHOOLS (COBIS), INC.

Current Principal Place of Business:

12101 S.W. 34TH STREET
MIAMI, FL 33175

New Principal Place of Business:

Current Mailing Address:

12101 S.W. 34TH STREET
MIAMI, FL 33175

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CASANOVA, ALICIA A
12101 S.W. 34TH STREET
MIAMI, FL 33175 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: P/D ( ) Delete
Name: CASANOVA, ALICIA A
Address: 12101 SW 34TH STREET
City-St-Zip: MIAMI, FL 33175 US

Title: VP/D ( ) Delete
Name: JIMENEZ-FOYO, MARGARITA
Address: 3720 EAST 4TH AVE.
City-St-Zip: HIALEAH, FL 33013 US

Title: S/D ( ) Delete
Name: JIMENEZ-FOYO, MARGARITA
Address: 3720 EAST 4TH AVE.
City-St-Zip: HIALEAH, FL 33013 US

Title: T/D ( ) Delete
Name: YSADA, EDITH
Address: 1685 S.W. 32ND AVE.
City-St-Zip: MIAMI, FL 33145 US

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:

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

I hereby certify that the information supplied with this filing does not qualify 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: EDITH YSADA TREA 02/22/2008

Electronic Signature of Signing Officer or Director — Date