

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003936

**FILED**  
**Jan 13, 2010**  
**Secretary of State**

**Entity Name:** EDUCATION MANAGEMENT SOLUTIONS, INC.

**Current Principal Place of Business:**

440 CREAMERY WAY, STE 100  
EXTON, PA 19341

**New Principal Place of Business:**

440 CREAMERY WAY  
SUITE 100  
EXTON, PA 19341

**Current Mailing Address:**

440 CREAMERY WAY, STE 100  
EXTON, PA 19341

**New Mailing Address:**

440 CREAMERY WAY  
SUITE 100  
EXTON, PA 19341

FEI Number: 23-2644606

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 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: CP  
Name: SINGH, ANURAG  
Address: 440 CREAMERY WAY, STE 100  
City-St-Zip: EXTON, PA 19341

Title: VPST  
Name: SINGH, SHARADA  
Address: 440 CREAMERY WAY, STE 100  
City-St-Zip: EXTON, PA 19341

I hereby 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 all other like empowered.

SIGNATURE: SHARADA SINGH

VPST

01/13/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date