

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90013 017 ***150.00

DOCUMENT # F10958

1. Entity Name
CONTINUING EDUCATION PROGRAMS, INC.



Principal Place of Business
**7480 FAIRWAY DRIVE, SUITE 106
MIAMI LAKES, FL 33014**

Mailing Address
**7480 FAIRWAY DRIVE, SUITE 106
MIAMI LAKES, FL 33014**

54026334

2. Principal Place of Business
1828 SE First Ave
Suite, Apt. #, etc.

3. Mailing Address
1828 SE First Ave
Suite, Apt. #, etc.

03032004 Chg-P CR2E034 (10/03)

City & State
Ft. Lauderdale, FL

City & State
Ft. Lauderdale, FL

4. FEI Number
59-2045681

Applied For
Not Applicable

Zip Country
33316 USA

Zip Country
33316 USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MOYA, FRANK M.D.
7480 FAIRWAY DR. STE#106
MIAMI LAKES, FL 33014**

Name
Frank Moya
Street Address (P.O. Box Number is Not Acceptable)
1320 S. Dixie Highway
Ste. 1060
City
Coral Gables **FL** Zip Code
33146

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/17/04

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
MOYA, FRANK
7480 FAIRWAY DRIVE, SUITE 106
MIAMI LAKES, FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
1320 S. Dixie Hwy, Ste. 1060
Coral Gables, FL 33146

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DS
MCNULTY, JOAN
7480 FAIRWAY DRIVE, SUITE 106
MIAMI LAKES, FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
1828 SE First Avenue
Ft. Lauderdale, FL 33316

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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 607, 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: **X**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joan McNulty

Date

(954) 763-8003

Daytime Phone #