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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G42199

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UNIVERSITY STUDIES IN AMERICA, INC.

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FILED Mar 14 1997 8:00am Secretary of State

.,							I (J. B. I. B. I. B. M. S. B. J.
Principal Plac	e of Business	Mailing Address			1 1201111 0013 01010 11001 1	 	ISE OEODE ESON OION C	IBII BEBII EBBI
C/O A. B. ASSADOURIAN 1580-3 CAPITAL CIRCLE N.W. 1580-3 CAPITAL CIRCLE N.W. TALLAHASSEE FL 32303 - 3/80 TALLAHASSEE FL 32303 - 3/80								
		270		3. Date Incorporated or 06/03/1983	Qualified	3a. Date of Last Report 03/19/1996		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number			Applied For
21		26		59-2308490		Not Applicable		
Suite, Apt. #, etc.		├ <u>`</u>	Suite, Apt. #, etc.		5. Certificate of Status Desired Sa.75 Addition			
City & State	^	Cily & State						
23		28	<u>├</u> ¬ `		6. Election Campaign Fit Trust Fund Contribution			
Zip	Country	Zip	Country	/	8. This corporation has t			
24	25	29	30		Florida Statutes	Z		1 a. 199.052,
	9. Name and Address of Curren				10. Name and Address			
ASS	ADOURIAN, ALBERT B.		81	Name	a-lou a in	M	Kock	R
	E. TENNESSEE ST.		82	Street Add	race (P.O. Roy Mumbar is No.	Accont bla	wor	<u>~·</u>
	LAHASSEE FL 32308		02	156	0-3 000	AZC.	ip N.	M.
-,			63			· · · · · · · · · · · · · · · · · · ·		
			84	City			As 7	in Oada
			84	70/1	aff SSEE		FL 85 22	10 Code 2/8
11. Pursuant office or ragent. I a	to the provisions of Sections 607.0503 egistered agent, or both, in the State m familiar with, and accept the obliga	2 and 607.1508, Florida Sta of Florida, Such change wa tions of, Section 607.0505,	itutes, the abov is authorized b Florida Statute	e-named corp y the corpora s.	poration submits this stateme tion's board of directors. The	nt for the purp reby accept t	pose of changin he appointment	g its registered as registered
SIGNATURE	Signature, typed or printed name of registered ages	er sivel official products at the	NOTE - Boustoned An	col Signal vo teor	ized when reinstating)		DATE	
12.	OF FICERS AND		I 13.	controller recor	ADDITIONS/CHANGES	TO OFFICER		ORS IN 12
TITLE	PD	DELETE	1.1 1\TLE				Chang	
NAME	ASSADOURIAN, ALBERT B.		1,2 NAME					
STREET ADDRESS	1560-3 CAPITAL CIR NW		1.3 STREE	ADDRESS				
CITY-ST-ZIP	TALLAHASSEE FL		1.4 CITY-5	S1 - ZIP				
TITLE		DELETE	2.1 TITLE				☐ Chang	ge 🔲 Addition
NAME			2.2 NAME					
STREET ADDRESS			2 3 STREET	ADDRESS				
CITY-ST-ZIP			2 4 CITY -	\$1-7IP				
TITLE		☐ DELETE	3.1 TITLE				☐ Chang	ge 🔲 Addition
NAME			3.2 NAME					1
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY-ST-ZIP			3.4. CITY-	S1-ZIP				
TITLE		☐ DELETE	4.1 TITLE				Chang	ge 🔲 Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET	ADDRES\$				
CITY-ST-ZIP			4.4 City - 9	ST - ZIP				
TITLE		☐ DELETE	5.1 TOLE				Chang	je 🔲 Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	ADDRESS				
CITY-ST-ZIP			5.4 DiTY-9	ST-ZIP				
TITLE		☐ DELETE	61 TITLE				☐ Chang	ge 🔲 Addition
NAME			6.2 NAME					
STREET ADDRESS			63 STREET	ADDRESS				
CITY-SY-ZIP			6.4 CHY-5					
44 Ldo borot	ov certify that the information supplied	Livids this filing door not a	alify for the eye	raption states	d in Section 119 07/3Vi) Flori	da Statutos I	further earlify th	and the

Information indicated on this annual report or supplemental annual 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 12 or Block 13 that an address.