

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Murrain
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

MAY -1 AM 9:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **K66994** (0)

1. Corporate Name
HIALEAH SYSTEM FOR EDUCATION, INC.

Principal Place of Business: 7601 W FLAGLER ST-2ND FL MIAMI FL 33144-2453 US
Mailing Address: 7601 W FLAGLER ST-2ND FL MIAMI FL 33144-2453 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21. HIALEAH SYSTEM FOR EDUCATION	26. HIALEAH SYSTEM FOR EDUCATION
22. 19151 S. Dixie HWY 205	27. 19151 S. Dixie HWY 205
23. Miami, Florida 33157	28. Miami, Florida 33157
24. City	29. Zip
25. County	30. County

3. Date Incorporated or Qualified	3a. Date of Last Report
02/14/1989	03/11/1994
4. FEI Number	Applied For / Not Applicable
65-0104735	
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Fund Form Commitment	<input type="checkbox"/> \$5.00 May Be Added to Fees
7. This corporation has liability for intangible tax under § 190.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent
YTURRIA, PAUL
7601 W. FLAGLER ST.
SUITE 200
MIAMI FL 33144

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code

11. Pursuant to the provisions of Sections 607.025 and 607.15(9), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am a natural citizen and a legal resident of the State of Florida, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

NAME	PD PIACENTI, ROBERT 6636 SW 96TH ST. MIAMI FL
NAME	VD PIACENTI, GLADYS B. 6636 SW 96TH ST. MIAMI FL
NAME	SD ALONSO, JENNY 511 S.W. 88TH PL W. MIAMI FL
NAME	TD BRAVO, ARLENE 672 S.W. 88TH PL E. MIAMI FL
NAME	VP SANCHEZ, MICHELLE 3101 SW 133RD CT. MIAMI FL

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS, IF ANY

NAME	TYPE	CHANGE / ADDITION
		<input type="checkbox"/> Change <input type="checkbox"/> Addition
		<input type="checkbox"/> Change <input type="checkbox"/> Addition
		<input type="checkbox"/> Change <input type="checkbox"/> Addition
		<input type="checkbox"/> Change <input type="checkbox"/> Addition
		<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the undersigned, certify that the information supplied with this filing is substantially true and correct and that I am a natural citizen and a legal resident of the State of Florida. I further certify that I am an officer or director of this corporation. The receiving or filing of this report is required by Chapter 607, Florida Statutes, and that my name appears in Block 12, Block 13 or changed or corrected information with an address.

SIGNATURE: *Jenny Alonso*
SIGNATURE AND TYPE (PRINT) PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JENNY ALONSO 4-27-95 806-253-8295