FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

APPROVED
AND
FILED

95 MAY -1 AM 10:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L87473** **(9)**

1. Corporate Name
FLORIDA PILOT SCHOOL, INC.

Principal Place of Business
3915 ST. LUCIE BLVD.
PO BOX 1629
FT. PIERCE FL 34954
US

Mailing Address
3915 ST. LUCIE BLVD.
PO BOX 1629
FT. PIERCE FL 34954
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/17/1990
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21
Suite, Apt. # or Bldg.
22
City & Zip
23
24 25

2a. Mailing Address
26
Suite, Apt. # or Bldg.
27
City & Zip
28
29 30

4. FEI Number: 65-0215931 — Applied For / Not Applicable

5. Certificate of State Taxes — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution — $5.00 May Be Added to Fees

8. Is corporation registered, or intending to register to do business in Florida Statutes? Yes / No

9. Name and Address of Current Registered Agent
FOWLER, MICHAEL D.
1803 SOUTH 25TH STREET, SUITE 5
FORT PIERCE FL 34947

10. Name and Address of New Registered Agent
81 Name: MAKTOUF SAMIR
82 Street Address (P.O. Box Number is Not Acceptable): 4250 N. A1A Apt 1204
83
84 City: Fort Pierce FL 85 Zip Code: 34949

11. Pursuant to the provisions of Section 607.0505 of the 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. The corporation is duly authorized to do so. I hereby accept the appointment as registered agent. I am familiar with and accept the duties and responsibilities of registered agent.

SIGNATURE: Samir Maktouf SAMIR MAKTOUF, President APR/29TH/95

12. OFFICERS AND DIRECTORS
TITLE: PTS
NAME: MAKTOUF, SAMIR
Street Address: 4250 N A1A, #1204
City: FT. PIERCE FL

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS
Title / Name / Street Address / City — Change / Addition

14. 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 force and 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 Florida Statutes; and that my name appears in Block 12 or Block 13 hereof with respect to the officers and directors of the corporation.

SIGNATURE: Samir Maktouf SAMIR MAKTOUF APR/29/95 407/466-9422.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

0403061 FP