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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # M17056

MODERN SCHOOLS INTERNATIONAL, INC.

Principal Place	e of Business	Mailing Address						
100 NORTHWES	ST 37TH AVE.	100 NORTHWEST 37TH AVE.						
2ND FLR		2ND FLR		20 110	T WORTE IN THE	3D40E		
MIAMI FL 33125		MIAMI FL 33125			DO NOT WRITE IN THIS SPACE			
US		US			3. Date Incorporated or Qu	ualifed		į
					06/20/1985			
2. Principal Pl	lace of Business	2a. Mailing Address			4, FEI Number		A	pplied For
21		26			59-1161072			lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Des	sired 🛣		Additional	
22		27		5. Certificate of Status Des	siled 🔼	Fee F	Required	
City & State		City & State		6. Election Campaign Fina	ancing	\$5.00	May Be	
23		28			Trust Fund Contribution	- II	•	to Fees
Zip	Country	Zip -	Country		8. This corporation owes to	the current year Inta	ngible	
24	25	29 30	7		Personal Property Tax.	-	ŬYes	⊠ No
241	9. Name and Address of Current		1		10. Name and Address of		gent	
	5. Name and Addiess of Garrott	. togiotoroa / tgoin	81	Name				
RUN	TINX LEOPOLD				<u> </u>			
1	NW 37 AVE		82	Street Add	dress (P.O. Box Number is Not A	Acceptable)		
			_			<u> </u>		
MIAN	AI FL 33125		83					
	•		84	City	- p		85 Zip	Code
				'		FL		
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above	e-named corp	poration submits this statement	for the purpose of	hanging it	s registered
l office or n	egistered agent, or both, in the State of	Florida. Such change was auth-	orized by	the corporati	tion's board of directors. I hereb	y accept the appoin	tment as i	egistered
	agiatorea agont, or boar, in the state of		i Statutes					
ayent. ra	m familiar with, and accept the obligation	MIS 01, 000MOIT 001.0000, 1 10MO		•				
SIGNATURE	m familiar with, and accept the obligation				red when reinstating)	DATE		
SIGNATURE	m familiar with, and accept the obligation	and title if applicable. (NOTE: Re	gistered Ager		red when reinstating)	DATE TO OFFICERS ANI	DIRECT	ORS IN 12
SIGNATURE	m familiar with, and accept the obligation Signature, typed or printed name of registered agent a OFFICERS AND	and title if applicable. (NOTE: Rep	gistered Ager		red when reinstating) ADDITIONS/CHANGES			
SIGNATURE 12. TITLE	m familiar with, and accept the obligation Signature, typed or printed name of registered agent a OFFICERS AND	and title if applicable. (NOTE: Re	gistered Agen	nt signature requir	ADDITIONS/CHANGES		D DIRECT	
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SIGNATURE 12. TITLE , NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent a OFFICERS AND PTD BUNTINX, LEOPOLDO 100 NORTHWEST 37TH AVE. MIAMI FL	and title if applicable. (NOTE: Rep DIRECTOR\$	13. 1.1 TITLE 1.2 NAME 1.3 STREET	ot signature require	ADDITIONS/CHANGES		Change	Addition
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14. 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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP