

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M25312

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Entity Name:** ACADEMIC SPEAKERS OF AMERICA, INC.

**Current Principal Place of Business:**

SITE 27  
3001 NORTH STATE ROAD 7  
HOLLYWOOD, FL 33021

**New Principal Place of Business:**

SITE 27  
3001 NORTH STATE ROAD 7  
HOLLYWOOD, FL 33021 UN

**Current Mailing Address:**

9854 WEST BALD MOUNTAIN COURT  
AGUA DULCE, CA 91390

**New Mailing Address:**

FEI Number: 59-2617360

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

ALTMAN, LINDA  
SITE #27  
3001 NORTH STATE ROAD 7  
HOLLYWOOD, FL 33021 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: ALTMAN, LINDA  
Address: SITE #27, 3001 NORTH STATE ROAD 7  
City-St-Zip: HOLLYWOOD, FL 33021

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 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 above, or on an attachment with all other like empowered.

SIGNATURE: LINDA ALTMAN

PD

01/05/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date