## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000006145

Entity Name: THE ALLIANCE FOR EDUCATION, INC.

FILED Feb 22, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
1911 NW 40TH COURT POMPANO BEACH, FL 33064				8100 N. UNIVERSITY DRIVE SUITE 101 TAMARAC, FL 33321 US			
1911 NW 40TH COURT POMPANO BEACH, FL 33064  FEI Number: 65-1042013 FEI Number Applied For ( )				8100 N. UNIVERSITY DRIVE SUITE 101			
				TAMARAC, FL 33321 US			
				I Number Not Applicable ( )		Certificate of Status Desired ( )	
Name and	Address of C	Surrent Registered Agent:		Name and	Address of I	New Registered Age	nt:
RABIN, MO 2898 NW S CORAL SE		3065 US					
	named entity : e of Florida.	submits this statement for the p	urpose of	changing i	ts registered o	office or registered ag	ent, or both,
SIGNATUR	RE:						
Electronic Signature of Registered Agent				Date			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	D ( ) WEINSTEIN, P 2482 N. STATE MARGATE, FL	RD. 7		Title: Name: Address: City-St-Zip:	(	) Change()Addition	
Title: Name: Address: City-St-Zip:	D ( ) POLLACK, JAY 3430 NW 21ST COCONUT CRI	ST.		Title: Name: Address: City-St-Zip:	(	) Change()Addition	
Title: Name: Address: City-St-Zip:	D ( ) ZALMAN BUKIE 9205 TIVOLI PI BOCA RATON,	ACE		Title: Name: Address: City-St-Zip:	DST (X ZALMAN BUKII 9205 TIVOLI P BOCA RATON,	LACE	
Title: Name: Address: City-St-Zip:	D ( ) MALKA, ALBEF 8617 NW 49TH CORAL SPRIN	DR.		Title: Name: Address: City-St-Zip:	D (X SASLAFSKY, N 20178 PALM IS BOCA RATON,	SLAND DRIVE	
Title: Name: Address: City-St-Zip:	REINGOLD, BE	SS PALM COURT		Title: Name: Address: City-St-Zip:	RABIN, MOSHI 2898 NW 95 A		
Title: Name: Address: City-St-Zip:	P (X RABIN, MOSHE 2898 NW 95TH CORAL SPRIN	AVENUE		Title: Name: Address: City-St-Zip:	(	) Change()Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MOSHE RABIN P 02/22/2008