2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003035

Apr 19, 2005 Secretary of State

Entity Name: THE RUGGERO II UNIVERSITY - STUDIORUM UNIVERSITAS INDEPENDENT STUDY NON

TRADITIONAL, INC.

Current Principal Place of Business: New Principal Place of Business:

8082 SAGO PALM LANE 17740 FOXGLOVE LANE BOYNTON BEACH, FL 33436 BOCA RATON, FL 33487 US

Current Mailing Address: New Mailing Address:

8082 SAGO PALM LANE
BOYNTON BEACH, FL 33436
17740 FOXGLOVE LANE
BOCA RATON, FL 33487 US

FEI Number: 42-1561354 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

CORTESE, VINCENZO

8082 SAGO PALM LANE

BOYNTON BEACH, FL 33436 US

CORTESE, VINCENZO

17740 FOXGLOVE LANE

BOCA RATON, FL 33487 US

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: 04/19/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition
Name: CORTESE, VINCENZO Name: CORTESE, VINCENZO
Address: VIA AGONSTINO MITELLI 76,
Address: VIA AGONSTINO MITELLI 76,

City-St-Zip: ROMA, ITALIA 00133, City-St-Zip: ROMA, LZ 00133 IT

Title: () Delete Title: (X) Change () Addition Name: PATRIZIA TARTARO, GUISEPPA Name: PATRIZIA TARTARO, GUISEPPA Address: VIA AGONSTINO MITELLI 76. Address: VIA AGONSTINO MITELLI 76. City-St-Zip: ROMA, ITALIA 00133, City-St-Zip: ROMA, LZ 00133 IT

Title: () Delete Title: (X) Change () Addition PALEOLOGO, GIOVANNI V PALEOLOGO, GIOVANNI V Name: Name: VIA AGONSTINO MITELLI 76, VIA AGONSTINO MITELLI 76, Address: Address: City-St-Zip: ROMA, ITALIA 00133. City-St-Zip: ROMA, LZ 00133 IT

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GIUSEPPA M. TARTARO D 04/19/2005