2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2008
Secretary of State

DOCUMENT# N01000005984

Entity Name: ONE WORLD LEARNING CENTER, INC.

Current Principal Place of Business:

1360 KASIM STREET
OPA-LOCK, FL 33054 US

New Principal Place of Business:

14500 NW 6TH AVENUE
NORTH MIAMI, FL 33161 US

Current Mailing Address:

1031 IVES DAIRY ROAD
#228
MIAMI, FL 33179 US

New Mailing Address:

P O BOX 171906
HIALEAH, FL 33017 US

FEI Number: 65-1129474 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PATTERSON & COMPANY, P.A.
1031 IVES DAIRY ROAD
SUITE 228
MIAMI, FL 33179 US

Name and Address of New Registered Agent:

CLARKE, MARTIN A
18954 NW 91ST AVENUE
HIALEAH, FL 33018 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: MARTIN CLARKE 03/05/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PT ( ) Delete
Name: PATTERSON, ANTOINETTE
Address: 1360 KASIM STREET
City-St-Zip: OPA LOCKA, FL 33054

Title: VD ( ) Delete
Name: CLARKE, MARTIN
Address: 1360 KASIM STREET
City-St-Zip: OPA LOCKA, FL 33054

Title: SD ( ) Delete
Name: PATTERSON, LILLIE
Address: 1150 NE 211TH TERRACE
City-St-Zip: MIAMI, FL 33179

Title: D ( ) Delete
Name: PATTERSON-CLARKE, ANTOINETTE
Address: 1360 KASIM STREET
City-St-Zip: OPA LOCKA, FL 33054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition
Name: PATTERSON, ANTOINETTE
Address: P O BOX 171906
City-St-Zip: HIALEAH, FL 33017

Title: VD (X) Change ( ) Addition
Name: CLARKE, MARTIN
Address: P O BOX 171906
City-St-Zip: HIALEAH, FL 33017

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ED (X) Change ( ) Addition
Name: PATTERSON-CLARKE, ANTOINETTE
Address: P O BOX 171906
City-St-Zip: HIALEAH, FL 33017

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: ANTOINETTE PATTERSON-CLARKE P 03/05/2008
Electronic Signature of Signing Officer or Director Date