2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006417

FILED Apr 30, 2004 Secretary of State

Entity Name: HORIZON ACADEMY OF BUSINESS & TECHNOLOGY, INC.

Current P	rincipal Place of Business:	New Principal Place of	Business:	
P O BOX : WEST PA	3254 ILM BEACH, FL 334023254			
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
P O BOX : WEST PA	3254 ILM BEACH, FL 334023254			
FEI Number	: FEI Number Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of Current Registered Agent	Name and Address of N	lew Registered Agent:	
	I, ALPHONSO S ROCENTRE BOULEVARD			
6				
6 WEST PA	ILM BEACH, FL 33407 US			
The above	LM BEACH, FL 33407 US e named entity submits this statement for the e of Florida.	ne purpose of changing its registered o	office or registered agent, or both,	
The above	e named entity submits this statement for the of Florida.	ne purpose of changing its registered o	office or registered agent, or both,	
The above in the Stat	e named entity submits this statement for the of Florida.		office or registered agent, or both,	
The above in the Stat SIGNATU	e named entity submits this statement for the of Florida.	Agent		
The above in the State SIGNATU OFFICER Title: Name: Address:	e named entity submits this statement for the of Florida. RE: Electronic Signature of Registered	Agent ADDITIONS/CHANGES	Date	
The above in the Stat SIGNATU	e named entity submits this statement for the of Florida. RE: Electronic Signature of Registered S AND DIRECTORS: D () Delete FANJUL, EMILIA 105 JUNGLE ROAD	Agent ADDITIONS/CHANGES Title: () Name: Address: City-St-Zip:	Date TO OFFICERS AND DIRECTORS	

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: EMILIA FANJUL PRES 04/30/2004