2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000660

Entity Name: COOL KIDS LEARN, INC.

FILED Feb 16, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3900 N.W. 79TH AVE. SUITE 211 MIAMI, FL 33166 **Current Mailing Address: New Mailing Address:** 3900 N.W. 79TH AVE. 303 NW 191ST STREET SUITE 211 MIAMI GARDENS, FL 33169 MIAMI, FL 33166 FEI Number: 04-3594334 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: KILPATRICK, ANDREA R 120 JEFFERSON AVE. #12009 MIAMI, FL 33139 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete KILPATRICK, ANDREA KILPATRICK, ANDREA Name: Name: 120 JEFFERSON AVE, #12009 Address: 120 JEFFERSON AVE, #12009 Address: City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI BEACH, FL 33139 Title: Title: (X) Change () Addition () Delete COPELAND, CUTARI Name: COPELAND, JOHN Name: Address: 1940 SW 120TH TERR Address: 12938 SW 26TH STREET City-St-Zip: MIRAMAR, FL 33027 City-St-Zip: MIRAMAR, FL 33027 Title: () Delete Title: () Change () Addition DELIMA, DOROTHY Name: Name: 17525 SW 33RD COURT Address: Address: City-St-Zip: MIRAMAR, FL 33029 City-St-Zip: Title: () Delete Title: () Change (X) Addition Name: Name: EARLES, ALISON 1541 FORDHAM CT Address: Address: City-St-Zip: City-St-Zip: ATLANTA, GA 30306 Title: () Delete Title: () Change (X) Addition SMITH-FRANCIS, AKIBA Name: Name: 25 PEABODYTERRACE #31 Address: Address: City-St-Zip: City-St-Zip: CAMBRIDGE, MA 02138

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: ANDREA KILPATRICK Ρ 02/16/2005