2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000002273

Entity Name: SEPHARDI SCHOOL, INC.

FILED Apr 25, 2003 Secretary of State

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

203 MEADOW HILLS DR SANFORD, FL 32773

Current Mailing Address: New Mailing Address:

PO BOX 950825 LAKE MARY, FL 327950825

FEI Number: 59-3442798 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LOPEZ, MARSHALL 203 MEADOW HILLS DR SANFORD, FL 32773

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:

Clashania Cinnahura of Davietana d Anaut

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 () Delete
 Title:
 PD
 (X) Change () Addition

 Name:
 LOPEZ, MARSHALL
 Name:
 LOPEZ, MARSHALL

 Address:
 203 MEADOW HILLS DR
 Address:
 203 MEADOW HILLS DR

 City-St-Zip:
 SANFORD, FL 32773
 SANFORD, FL 32773

Title: V () Delete Title: VD (X) Change () Addition

Name: LOPEZ, BETSY Name: LOPEZ, BETSY
Address: 203 MEADOW HILLS DR Address: 203 MEADOW HILLS DR

 Address:
 203 MEADOW HILLS DR
 Address:
 203 MEADOW HILLS DR

 City-St-Zip:
 SANFORD, FL 32773
 City-St-Zip:
 SANFORD, FL 32773

Title: ST () Delete Title: () Change () Addition

 Name:
 LOPEZ, ELSA
 Name:

 Address:
 203 MEADOW HILLS DR
 Address:

 City-St-Zip:
 SANFORD, FL 32773
 City-St-Zip:

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: MARSHALL LOPEZ P 04/25/2003