

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005532

FILED
Mar 21, 2012
Secretary of State

Entity Name: THE COLLEGIATE LEARNING EXCHANGE INC.

Current Principal Place of Business:

505 W 47TH ST
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

505 W 47TH ST
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 02-0637274

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASLY, DARIUS ESQ
19 W FLAGLER ST, STE 211
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

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:

Title: DP
Name: POMPER, MARK DR
Address: 505 W 47TH ST
City-St-Zip: MIAMI BEACH, FL 33140

Title: DT
Name: DIAMOND, JUSTIN
Address: 505 W 47TH ST
City-St-Zip: MIAMI BEACH, FL 33140

Title: D
Name: BEFELER, BEN
Address: 505 W 47TH ST
City-St-Zip: MIAMI BEACH, FL 33140

Title: D
Name: GALBUT, ELCHANAN
Address: 505 W 47TH ST
City-St-Zip: MIAMI BEACH, FL 33140

Title: D
Name: GREENSTEIN, MEL
Address: 505 W 47TH ST
City-St-Zip: MIAMI BEACH, FL 33140

Title: D
Name: HERSSEIN, HILLEL
Address: 505 W 47TH ST
City-St-Zip: MIAMI BEACH, FL 33140

I hereby 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 all other like empowered.

SIGNATURE: JUSTIN DIAMOND

DT

03/21/2012

Electronic Signature of Signing Officer or Director

Date

N0200000553
3-21-12

COLLEGIATE LEARNING EXCHANGE, INC.
FLORIDA NON PROFIT CORPORATION

DOCUMENT NUMBER N02000005532

ADDITIONAL DIRECTORS

7. TITLE: D
 NAME: LAPCIUC, YAIR
 ADDRESS: 505 W 47TH ST
 CITY, STATE ZIP: MIAMI BEACH, FL 33140
8. TITLE: D
 NAME: SALZMAN, DAMON
 ADDRESS: 505 W 47TH ST
 CITY, STATE ZIP: MIAMI BEACH, FL 33140
9. TITLE: D
 NAME: TURETSKY, RICKY
 ADDRESS: 505 W 47TH ST
 CITY, STATE ZIP: MIAMI BEACH, FL 33140
10. TITLE: D
 NAME: WEIN, LEONARD
 ADDRESS: 505 W 47TH ST
 CITY, STATE ZIP: MIAMI BEACH, FL 33140
11. TITLE: D
 NAME: YARUS, GARY
 ADDRESS: 505 W 47TH ST
 CITY, STATE ZIP: MIAMI BEACH, FL 33140
12. TITLE: D
 NAME: UNGAR, AHARON
 ADDRESS: 505 W 47TH ST
 CITY, STATE ZIP: MIAMI BEACH, FL 33140