2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000006619

Entity Name: TUTORING AND GRANT INSTITUTION, INC.

FILED May 01, 2003 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
800 NW 145TH MIAMI, FL 3316	TERRACE						
Current Mailing Address:				New Mailing Address:			
800 NW 145TH TERRACE MIAMI, FL 33168				13150 NE 3 COURT MIAMI, FL 33161			
FEI Number: 02-06	El Number: 02-0641165 FEI Number Applied For() FEI Nu			mber Not Applicable () Certificate of Status Desired ()			
Name and Addi	ress of Current Reg	istered Agent:		Name and	Address of	New Registere	ed Agent:
LOUDIS, CHRISTINA L 800 NW 145TH TERRACE MIAMI, FL 33168				LOUDIS, CHRISTINA L 13150 NE 3 COURT MIAMI, FL 33161			
The above name in the State of Flo	ed entity submits this orida.	statement for the p	ourpose o	f changing it	ts registered	office or registe	ered agent, or both,
SIGNATURE:				05/01/2003			
Electronic Signature of Registered Agent				Date			
OFFICERS AND	DIRECTORS:			ADDITION	S/CHANGES	S TO OFFICER	S AND DIRECTORS:
Title: Name: Address: City-St-Zip:	() Delete			Title: Name: Address: City-St-Zip:	D (HENRY, BOBI 7760 SW 132 MIAMI, FL 33	STREET	lition
Title: Name: Address: City-St-Zip:	() Delete			Title: Name: Address: City-St-Zip:	D (BROMER, PE 13205 NE 3 C MIAMI, FL 33	OURT	lition
Title: Name: Address: City-St-Zip:	() Delete			Title: Name: Address: City-St-Zip:	SOMERS, CA 9273 COLLIN		lition
Title: Name: Address: City-St-Zip:	()Delete			Title: Name: Address: City-St-Zip:	P/V (LOUDIS, CHR 13150 NE 3 C MIAMI, FL 33	OURT	lition
Title: Name: Address: City-St-Zip:	() Delete			Title: Name: Address: City-St-Zip:	REEDER, JAN 730 NE 121 S		
Title: Name: Address: City-St-Zip:	() Delete			Title: Name: Address: City-St-Zip:	MARTIN, ANTI 953 NE 91 TE		lition

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: CHRISTINA LORELEI LOUDIS P/V 05/01/2003