

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009582

FILED
Feb 14, 2006
Secretary of State

Entity Name: CENTER FOR EDUCATIONAL ENTERPRISES, INC.

Current Principal Place of Business:

630 LAYNE BLVD., STE.101
HALLANDALE, FL 33009

New Principal Place of Business:

904 NE 2ND STREET
HALLANDALE BEACH, FL 330098512

Current Mailing Address:

630 LAYNE BLVD., STE.101
HALLANDALE, FL 33009

New Mailing Address:

904 NE 2ND STREET
HALLANDALE BEACH, FL 330098512

FEI Number: 81-0585999

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WINFREY, FRANCES
630 LAYNE BLVD., STE.101
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

WINFREY, FRANCES
904 NE 2ND STREET
HALLANDALE BEACH, FL 330098512 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: FRANCES WINFREY

02/14/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WINFREY, FRANCES
Address: 630 LAYNE BLVD., STE.101
City-St-Zip: HALLANDALE, FL 33009

Title: TD () Delete
Name: ROTKER, AMY
Address: 11711 NW 11TH ST.
City-St-Zip: PEMBROKE PINES, FL 33026

Title: SD () Delete
Name: GREENBERG, SUSAN L
Address: 20381 NE 30 AVE., APT. 116
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: FRANCES WINFREY

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02/14/2006

Electronic Signature of Signing Officer or Director

Date