

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000009634

FILED
Sep 10, 2003
Secretary of State

Entity Name: SPANISH ACADEMIES. INC.

Current Principal Place of Business:

447 NW SPANISH RIVER BLVD
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

447 NW SPANISH RIVER BLVD
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 82-0589149

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEIDMAN, MARVIN B
2600 SW 3RD AVE., SUITE 800 B
MIAMI, FL 33129 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: PD () Delete
Name: CARDONA, LEO
Address: 447 NW SPANISH RIVER BLVD
City-St-Zip: BOCA RATON, FL 33431

Title: VD () Delete
Name: SMITH, JUDITH A
Address: 447 NW SPANISH RIVER BLVD
City-St-Zip: BOCA RATON, FL 33431

Title: SD () Delete
Name: WHITNEY, ELIZABETH A
Address: 1823 GOLDEN PONDS DR.
City-St-Zip: FT. PIERCE, FL 34945

Title: D () Delete
Name: GARCIA, BERNARDO
Address: 557 106TH AVE. NORTH
City-St-Zip: NAPLES, FL 34108

Title: D () Delete
Name: CARDONA, DAVID
Address: 447 NW SPANISH RIVER BLVD
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CARDONA, LEO DR
Address: 447 NW SPANISH RIVER BLVD
City-St-Zip: BOCA RATON, FL 33431

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

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 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: JUDITH A. SMITH

VD

09/10/2003

Electronic Signature of Signing Officer or Director

Date