

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004976

FILED
Jan 07, 2004
Secretary of State

Entity Name: BLOSSOM LEARNING CENTER, INC.

Current Principal Place of Business:

2301 NW 104TH TERR.
MIAMI, FL 33147

New Principal Place of Business:

Current Mailing Address:

2301 NW 104TH TERR.
MIAMI, FL 33147

New Mailing Address:

FEI Number: 16-1672429

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMMONS, IVETTE I
2301 NW 104TH TERR.
MIAMI, FL 33147

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: CEO () Delete
Name: SIMMONS, IVETTE I
Address: 2301 NW 104TH TERR.
City-St-Zip: MIAMI, FL 33147

Title: VD () Delete
Name: JEAFFELIX, BRAHMS
Address: 150 NW 121ST ST.
City-St-Zip: MIAMI, FL 33147

Title: SD () Delete
Name: CARRAWAY, LILIA
Address: 1130 RUTLAND ST.
City-St-Zip: OPA LOCKA, FL 33054

Title: TD () Delete
Name: BROWN, HENRIETTA
Address: 12980 NE 7TH AVE.
City-St-Zip: N. MIAMI, FL 33161

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:

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: IVETTE I. SIMMONS

CEOD

01/07/2004

Electronic Signature of Signing Officer or Director

Date