

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007049

FILED
Jan 17, 2007
Secretary of State

Entity Name: ROMANS SCHOOLS INC.

Current Principal Place of Business:

11515 SW 60 ST.
MIAMI, FL 33173 US

New Principal Place of Business:

Current Mailing Address:

11515 SW 60 ST.
MIAMI, FL 33173 US

New Mailing Address:

FEI Number: 20-0142497

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARRASTIA, JORGE J
11515 SW 60 ST
MIAMI, FL 33173 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: P () Delete
Name: MARTINEZ-FRAGA, PEDRO J JR
Address: 1221 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131 US

Title: VP () Delete
Name: ARRASTIA, JORGE J
Address: 11515 SW 60 STREET
City-St-Zip: MIAMI, FL 33173 US

Title: SEC () Delete
Name: RODRIGUEZ, MARIA
Address: 7921 NW 169 TERRACE
City-St-Zip: MIAMI LAKES, FL 33016 US

Title: TREA () Delete
Name: MARTINEZ FRAGA, PEDRO J SR
Address: 11251 SW 157 COURT
City-St-Zip: MIAMI, FL 33196 US

Title: VOC () Delete
Name: ARAGON, MARITZA
Address: 2002 SW 84 COURT
City-St-Zip: MIAMI, FL 33155 US

Title: VOC () Delete
Name: CASAS, LUIS
Address: 6899 SW 82 CT.
City-St-Zip: MIAMI, FL 33143 US

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:

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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: JORGE J ARRASTIA

PD

01/17/2007

Electronic Signature of Signing Officer or Director

Date