

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009954

FILED
Jul 29, 2008
Secretary of State

Entity Name: TUTOR IN TOWN, INC.

Current Principal Place of Business:

2843 SOUTH BAYSHORE DRIVE
15A
MIAMI, FL 33133

New Principal Place of Business:

578 LORETTO AVE
CORAL GABLES, FL 33146

Current Mailing Address:

2843 SOUTH BAYSHORE DRIVE
15A
MIAMI, FL 33133

New Mailing Address:

578 LORETTO AVE
CORAL GABLES, FL 33146

FEI Number: 20-0431068 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MARTINEZ, SUZETTE
2843 SOUTH BAYSHORE DRIVE
15A
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

MARTINEZ, SUZETTE
578 LORETTO AVE
CORAL GABLES, FL 33146 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: SUZETTE MARTINEZ

07/29/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MARTINEZ, SUZETTE
Address: 2843 SOUTH BAYSHORE DRIVE
City-St-Zip: MIAMI, FL 33133

Title: VP () Delete
Name: GUILARTE GIL, KIM
Address: 10240 SW 62 STREET
City-St-Zip: MIAMI, FL 33173

Title: S/T () Delete
Name: VALLEBONA DIAZ, LORENA
Address: 7401 SW 81 STREET
City-St-Zip: MIAMI, FL 33143

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 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: SUZETTE MARTINEZ

P

07/29/2008

Electronic Signature of Signing Officer or Director

Date