2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005042

Entity Name: DOXA INTERNATIONAL UNIVERSITY, INC.

FILED Jaņ 13, 2<u>00</u>7 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5400 W ATLANTIC BLVD 1750 UNIVERSITY DR POMPANO BEACH, FL 33063

220

CORAL SPRINGS, FL 33071

Current Mailing Address: New Mailing Address:

1750 UNIVERSITY DR 5400 W ATLANTIC BLVD

220

POMPANO BEACH, FL 33063 CORAL SPRINGS, FL 33071

FEI Number: 65-1230483 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MARINO, OSVALDO O MARINO, OSVALDO O 5400 W ÁTLANTIC RD 1750 UNIVERSITY DR

POMPANO BEACH, FL 33063 US 220 POMPANO BEACH, FL 33071 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: 01/13/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete MARINO, OSVALDO O MARINO, OSVALDO O Name: Name:

5400 W ATLANTIC BLVD Address: 1750 UNIVERSITY DR Address: City-St-Zip: POMPANO BEACH, FL 33063 City-St-Zip: CORAL SPRINGS, FL 33071

Title: () Delete Title: (X) Change () Addition

RUIZ, MONICA S Name: Name: RUIZ, MONICA S Address: 5400 W ATLANTIC BLVD Address: 1750 UNIVERSITY DR City-St-Zip: POMPANO BEACH, FL 33063 City-St-Zip: CORAL SPRINGS, FL 33071

Title: () Delete Title: (X) Change () Addition

LARES, GUILLERMO Name: LARES, GUILLERMO Name: 5400 W ATLANTIC BLVD Address: Address: 1750 UNIVERSITY DR City-St-Zip: POMPANO BEACH, FL 33063 City-St-Zip: CORAL SPRINGS, FL 33071

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: OSVALDO O MARINO Ρ 01/13/2007