

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008673

FILED
Feb 12, 2007
Secretary of State

Entity Name: YOUNG MINDS EDUCATIONAL PROGRAMS, INC.

Current Principal Place of Business:

240 NE 48TH TERRACE
MIAMI, FL 33137

New Principal Place of Business:

Current Mailing Address:

240 NE 48TH TERRACE
MIAMI, FL 33137

New Mailing Address:

FEI Number: 20-2171840

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERNARD, SERAPHIN W SR
240 NE 48TH TERRACE
MIAMI, FL 33137 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: DP () Delete
Name: BERNARD, SERAPHIN J
Address: 240 NE 48TH TERRACE
City-St-Zip: MIAMI, FL 33137

Title: DV () Delete
Name: BERNARD, TEDD
Address: 240 NE 48TH TERRACE
City-St-Zip: MIAMI, FL 33137

Title: DV (X) Delete
Name: COLON, IAN
Address: 8842 EMERSON
City-St-Zip: MIAMI BEACH, FL 33154

Title: DS (X) Delete
Name: PAGAN, AMARIS
Address: 5330 NW 197TH TERRACE
City-St-Zip: MIAMI, FL 33035

Title: DT (X) Delete
Name: GUZMAN, DIEGO
Address: 240 NE 48TH TERRACE
City-St-Zip: MIAMI, FL 33137

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:

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: TEDD BERNARD

DV

02/12/2007

Electronic Signature of Signing Officer or Director

Date