

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004019

FILED  
Sep 09, 2010  
Secretary of State

**Entity Name:** INTERNATIONAL OPEN UNIVERSITY INC.

**Current Principal Place of Business:**

C/O CYBER SOLUTIONS  
8721 SANTA MONICA BLVD  
LOS ANGELES, CA 90069 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O CYBER SOLUTIONS  
8721 SANTA MONICA BLVD  
LOS ANGELES, CA 90069 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

GALLETS, EUNICE  
2825 SW 22ND AVE.  
SUITE 105  
DELRAY BEACH, FL 33445 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  
Name: TAYLOR, IAN  
Address: C/O CYBER SOLUTIONS 8721 SANTA MONICA BLVD  
City-St-Zip: LOS ANGELES, CA 90069

Title: D  
Name: KENNY, BOSCO  
Address: BBS, DEPT 15, P O BOX 1037,  
City-St-Zip: FERNDAL, CA 95536

Title: D  
Name: KENNY, LINDA  
Address: BBS, DEPT 15, P O BOX 1037,  
City-St-Zip: FERNDAL, CA 95536

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL LASALA, AUTHORIZED REPRESENTATIVE AUTH

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

09/09/2010

\_\_\_\_\_  
Date