2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N05000008967

RT FILED May 17, 2006 Secretary of State

Entity Name: ADVANTAGE ACADEMY OF MIAMI, INC.

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

10320 NW 6TH STREET CORAL SPRINGS, FL 33071

Current Mailing Address: New Mailing Address:

10320 NW 6TH STREET CORAL SPRINGS, FL 33071

FEI Number: 20-3878749 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

STRADER, MICHAEL G. 10320 NW 6TH STREET CORAL SPRINGS, 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:

Clashania Oinnahara of Danishara d Anant

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 GOLDSCHMIDT, MICHAEL
 Name:
 GOLDSCHMIDT, MICHAEL

 Address:
 12082 NW 49TH DRIVE
 Address:
 12082 NW 49TH DRIVE

 City-St-Zip:
 CORAL SPRINGS, FL 33075
 City-St-Zip:
 CORAL SPRINGS, FL 33075

Title: D () Delete Title: VC (X) Change () Addition Name: CLARK, DONALD A. Name: RONALD, RENNA P

 Name:
 CLARK, DONALD A.
 Name:
 RONALD, RENNA P

 Address:
 675 SE 29 DR.
 Address:
 4364 NW 103RD TERRACE

 City-St-Zip:
 HOMESTEAD, FL 33033
 City-St-Zip:
 SUNRISE, FL 33351

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$

 Name:
 LLEONART-RODRIGUEZ, ANA
 Name:
 DEL MONTE, HELENA

 Address:
 520 SW 106 AVE.
 Address:
 3680 SW 18TH TERRACE

 City-St-Zip:
 MIAMI, FL 33165
 City-St-Zip:
 MIAMI, FL 33145

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: RONALD P RENNA VC 05/17/2006