

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009215

FILED
Apr 11, 2007
Secretary of State

Entity Name: ABRAHAM LINCOLN INTERNATIONAL UNIVERSITY, INC.

Current Principal Place of Business:

350 LINCOLN ROAD
SUITE 406
MIAMI BEACH, FL 33139 US

New Principal Place of Business:

Current Mailing Address:

350 LINCOLN ROAD
SUITE 406
MIAMI BEACH, FL 33139 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:

ADENIYI, ADESINA LAYO
350 LINCOLN ROAD
SUITE 406
MIAMI BEACH, FL 33139 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 () Delete
Name: ADENIYI, ADESINA LAYO
Address: 350 LINCOLN ROAD SUITE 406
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: VP () Delete
Name: ADENIYI, BAMITALE LOLA
Address: 350 LINCOLN ROAD SUITE 406
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: S () Delete
Name: ADENIYI, ADETOKUNBO BAB
Address: 350 LINCOLN ROAD SUITE 406
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: T () Delete
Name: ADENIYI, OMOYENI BIOLA
Address: 350 LINCOLN ROAD SUITE 406
City-St-Zip: MIAMI BEACH, FL 33139 US

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:

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: LAYO ADENIYI

P

04/11/2007

Electronic Signature of Signing Officer or Director

Date