2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005175

75016 PARIS, FRANCE,

City-St-Zip:

FILED Jun 30, 2007 Secretary of State

Entity Na	me: MCA ACADEMY, INC.			
Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
7520 SW 57TH AVE STE J MIAMI, FL 33143		2860 OAK AVENUE MIAMI, FL 33133		
Current Mailing Address:		New Mailing Addre	New Mailing Address:	
7520 SW 57TH AVE STE J MIAMI, FL 33143		2860 OAK AVENUE MIAMI, FL 33133		
	: 20-5389782 FEI Number Applied For() Face with s. 607.193(2)(b), F.S., the corporation did not re	FEI Number Not Applicable () ceive the prior notice.	Certificate of Status Desired ()	
Name and	Address of Current Registered Agent:	Name and Address	of New Registered Agent:	
KISHLAR, BRIGITTE 7520 SW 57TH AVE STE J MIAMI, FL 33143 US		2860 OAK AVENUE		
	e named entity submits this statement for the purpe e of Florida.	oose of changing its register	ed office or registered agent, or both,	
SIGNATURE:			06/30/2007	
	Electronic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	TPVS () Delete KISHLAR, BRIGITTE 3505 WILDWOOD CIR MIAMI, FL 33133	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () Delete KISHLAR, BRIGITTE 3505 WILDWOOD CIR MIAMI, FL 33133	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () Delete AYRAMDJAN, ALAIN 3, RUE DES DAMES AUGUSTINES 92200 NEUILLY, FRANCE,	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	T () Delete AYRAMDJAN, ALBERT 1 BIS HAMFAU BOII FAU	Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

SIGNATURE: BRIGITTE KISHLAR TPVS 06/30/2007