

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009777

FILED
Apr 04, 2008
Secretary of State

Entity Name: PYTHAGORAS MATH AND GENERAL TUTORING, INC.

Current Principal Place of Business:

10384 WEST FLAGLER STREET
MIAMI, FL 33174

New Principal Place of Business:

Current Mailing Address:

10384 WEST FLAGLER STREET
MIAMI, FL 33174

New Mailing Address:

FEI Number: 51-0575620

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORNAVACA, ANA L
10384 WEST FLAGLER STREET
MIAMI, FL 33174 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: PD () Delete
Name: ARROYO, ARMANDO
Address: 115 S.W. 112 AVE.
City-St-Zip: MIAMI, FL 33174

Title: VD () Delete
Name: CORNAVACA, ANA L
Address: 490 NW 58TH COURT
City-St-Zip: MIAMI, FL 33126

Title: SD () Delete
Name: MACIAS, EDGARD
Address: 3081 NW 6 ST.
City-St-Zip: MIAMI, FL 33125

Title: TD () Delete
Name: HERNANDEZ, AIDA D
Address: 3169 SW 24 ST
City-St-Zip: MIAMI, FL 33145

Title: D () Delete
Name: GARCIA, JAIME
Address: 4275 NW S. TAMiami CANAL APT..311
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CORNAVACA, ANA L
Address: 490 NW 58TH COURT
City-St-Zip: MIAMI, FL 33126

Title: VD (X) Change () Addition
Name: ARROYO, ARMANDO
Address: 115 SW 112 AVENIDA
City-St-Zip: MIAMI, FL 33174

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MALTES, JUAN
Address: 202 SW 102 AVE.
City-St-Zip: MIAMI, FL 33174

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.

SIGNATURE: ANA LORENA CORNAVACA

PD

04/04/2008

Electronic Signature of Signing Officer or Director

Date