

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003963

FILED  
Mar 30, 2010  
Secretary of State

**Entity Name:** INSTITUTE IPRE. PROFESSIONAL RESEARCH & EDUCATIONAL CORP

**Current Principal Place of Business:**

13876 SW 56 ST  
MIAMI, FL 33175 US

**New Principal Place of Business:**

**Current Mailing Address:**

13876 SW 56 ST  
MIAMI, FL 33175 US

**New Mailing Address:**

**FEI Number:** 68-0649222

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MERINO, MARIA  
3 GRANADA BLVD  
CORAL GABLES, FL 33146 US

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

TOTAL SERVICES CONSULTING INC  
3 GRANADA BLVD  
CORAL GABLES, FL 33146 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: ALEX RUIZ

03/30/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: COHEN, MARIA  
Address: 13876 SW 56 ST  
City-St-Zip: MIAMI, FL 33175 US

Title: VP  
Name: MORTON, RONALD  
Address: 400 CENTRAL PARK WEST  
City-St-Zip: NEW YORK, NY 10025 US

Title: VP  
Name: YOUNG, LIZA  
Address: 13876 SW 56 ST  
City-St-Zip: MIAMI, FL 33175 US

Title: D  
Name: ARNAUD, MORRIS  
Address: 105 W. 86 ST. SUITE 116  
City-St-Zip: NEW YORK, NY 10024 US

Title: D  
Name: DANIEL, ARIASA-PONS  
Address: 6538 COLLINS AVE. SUITE 386  
City-St-Zip: MIAMI BEACH, FL 33141 US

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: MORRIS ARNAUD

D

03/30/2010

Electronic Signature of Signing Officer or Director

Date