

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011218

FILED
Jan 18, 2009
Secretary of State

Entity Name: MENICHA LEARNING CENTER, INC.

Current Principal Place of Business:

3737 INDIAN CREEK DRIVE
#506
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

3737 INDIAN CREEK DRIVE
#506
MIAMI BEACH, FL 33140

New Mailing Address:

P O BOX 890
MONROE, NY 10949

FEI Number: 26-1475452

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TORIM, SHLOIME
3737 INDIAN CREEK DRIVE
#506
MIAMI BEACH, FL 33140 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: D () Delete
Name: TORIM, SHLOIME
Address: 3737 INDIAN CREEK DRIVE, #506
City-St-Zip: MIAMI BEACH, FL 33140

Title: D () Delete
Name: SCHWARTZ, NECHEMYA
Address: 3737 INDIAN CREEK DRIVE, #506
City-St-Zip: MIAMI BEACH, FL 33140

Title: D () Delete
Name: HOROWITZ, ELCHONON
Address: 3737 INDIAN CREEK DRIVE, #506
City-St-Zip: MIAMI BEACH, FL 33140

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:

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: SHLOIME TORIM

PRES

01/18/2009

Electronic Signature of Signing Officer or Director

Date