

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000006409

FILED  
May 01, 2011  
Secretary of State

Entity Name: MLBD EDUCATIONAL SERVICES, INC.

**Current Principal Place of Business:**

18539 SW 133RD AVENUE  
ROOM 2  
MIAMI, FL 33177 US

**New Principal Place of Business:**

**Current Mailing Address:**

18539 SW 133RD AVENUE  
ROOM 2  
MIAMI, FL 33177 US

**New Mailing Address:**

FEI Number: 80-0434172      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DESSALINES, MARIE L  
18539 SW 133RD AVENUE, ROOM 2  
MIAMI, FL 33177 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: PRES  
Name: DESSALINES, MARIE L  
Address: 18539 SW 133RD AVENUE, ROOM 2  
City-St-Zip: MIAMI, FL 33177 US

Title: TR  
Name: DESSALINES, GESTON  
Address: 18539 SW 133RD AVENUE  
City-St-Zip: MIAMI, FL 33177 US

Title: SEC  
Name: PARAISON, ANNIE O  
Address: 16520 SW 105 CT  
City-St-Zip: MIAMI, FL 33157 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: GESTON DESSALINES

TR

05/01/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date