

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 13, 2011
Secretary of State

DOCUMENT# N09000012157

Entity Name: EDUCARE CENTER INC.**Current Principal Place of Business:**EDUCARE CENTER INC.
12520 NW 11TH TRAIL
MIAMI, FL 33182**New Principal Place of Business:**EDUCARE CENTER INC.
2475 NW 95 AVE
MIAMI, FL 33172**Current Mailing Address:**EDUCARE CENTER INC.
12520 NW 11TH TRAIL
MIAMI, FL 33182**New Mailing Address:**EDUCARE CENTER INC.
2475 NW 95 AVE
MIAMI, FL 33172**FEI Number:** 27-1546483**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**OJITO, TERE
2716 W 84 ST
HIALEAH, FL 33016 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:** P
Name: OLIVIERI, LAURA
Address: 2475 NW 95 AVE
City-St-Zip: MIAMI, FL 33172**Title:** VP
Name: OLIVIERI, LAURA
Address: 2475 NW 95 AVE
City-St-Zip: MIAMI, FL 33172

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: LAURA OLIVIERI

P

07/13/2011

Electronic Signature of Signing Officer or Director

Date