

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N24273 (7)
1. Corporation Name
CHILDREN'S INTERNATIONAL EDUCATIONAL FOUNDATION, INC.

Principal Place of Business C/O NORMAN J. MICHAEL 1337 N. DIXIE HIGHWAY LAKE WORTH FL 33460-1826	Mailing Address C/O NORMAN J. MICHAEL 1337 N. DIXIE HIGHWAY LAKE WORTH FL 33460-1826
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3. Date Incorporated or Qualified
01/11/1988

4. FEI Number 65-0039138	Applied For <input type="checkbox"/> Not Applicable
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2. Principal Place of Business 21 3475 WOOLBRIGHT ROAD Suite, Apt. #, etc. 22	2a. Mailing Address 26 3475 WOOLBRIGHT ROAD Suite, Apt. #, etc. 27
City & State 23 BOYNTON BEACH, FL	City & State 28 BOYNTON BEACH, FL
Zip 24 33436	Country 25 PALM BEACH
Zip 29 33436	Country 30 PALM BEACH

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MICHAEL, NORMAN J
1337 N. DIXIE HWY.
LAKE WORTH FL 33460**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 3475 WOOLBRIGHT ROAD
83
84 City BOYNTON BEACH FL 85 Zip 33436

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MICHAEL, NORMAN J	1.2 NAME	
STREET ADDRESS	10460 PRESTWICK RD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MICHAEL, ELISHKA E	2.2 NAME	
STREET ADDRESS	10460 PRESTWICK RD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MICHAEL, ESTHER	3.2 NAME	
STREET ADDRESS	1467 SW 25TH PLACE	3.3 STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  **NORMAN J. MICHAEL** 2/5/98 561/733-4353

CR2E037 (1097)