

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91411 016 ****61.25

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N46032					
1. Entity Name HI-TECH TUTORING CENTER, INC.					
Principal Place of Business 4554 S. ORANGE BLOSSOM TRAIL ORLANDO, FL 32839			Mailing Address PO BOX 555661 ORLANDO, FL 32855-5661 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
4. FBI Number 59-3892747			Applied For ☐ Not Applicable		
5. Certificate of Status Desired ☐			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent MOSLEY, ERNESTINE D 4554 S. ORANGE BLOSSOM TRAIL #72 ORLANDO, FL 32839			7. Name and Address of New Registered Agent		
Name			Name		
Street Address (P.O. Box Number is Not Acceptable)			Street Address (P.O. Box Number is Not Acceptable)		
City			City		
FL			Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (Signature to be printed name of registered agent and use if applicable. (NOTE: Registered Agent's signature required when filing for status change.)					
DATE _____					
9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS					
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 190.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 517, Florida Statutes; and that my name appears in Block 10 or Block 11, if changed, or on an attachment with an address, with all other the empowered.					
SIGNATURE <u>Mildred Graham</u> <u>Mildred Graham</u> <u>5/1/03</u> <u>(407) 858-0919</u>					

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☒ CHECK HERE IF MAKING CHANGES

05-05-2003 (12/02)