2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2007
Secretary of State

DOCUMENT# N49990

Entity Name: INTERNATIONAL COLLEGE OF THE CAYMAN ISLANDS, INC.

Current Principal Place of Business:

5220 NW 7TH STREET
SUITE A-102
MIAMI, FL 33126

New Principal Place of Business:

9360 SW 83RD STREET
MIAMI, FL 33173

Current Mailing Address:

5220 NW 7TH STREET
SUITE A-102
MIAMI, FL 33126

New Mailing Address:

1185 HILLERY WAY
MIAMI, FL 94502

FEI Number: 65-0351573 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CUMMINGS, ELSA M PH.D.
5220 N.W. 7TH STREET
SUITE A102
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

CUMMINGS, ELSA M PH.D.
9360 SW 83RD STREET
MIAMI, FL 33173 US

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: _____ 03/15/2007
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: CD ( ) Delete
Name: CUMMINGS, ELSA M
Address: D5220 NW 7TH STREET, SUITE A-102
City-St-Zip: MIAMI, FL 33126

Title: SD ( ) Delete
Name: ORSON, CLAIRE
Address: D2845 NW 95TH AVENUE
City-St-Zip: SUNRISE, FL 33351

Title: D ( ) Delete
Name: CUMMINGS, APRIL
Address: 1185 HILLERY WAY
City-St-Zip: ALAMEDA, CA 94502

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change ( ) Addition
Name: CUMMINGS, ELSA M
Address: 9360 SW 83RD STREET
City-St-Zip: MIAMI, FL 33173

Title: SD (X) Change ( ) Addition
Name: ORSON, CLAIRE
Address: 2845 NW 95TH AVENUE
City-St-Zip: SUNRISE, FL 33351

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ELSA M. CUMMINGS SD 03/15/2007
Electronic Signature of Signing Officer or Director — Date