

FILE NOW: FILING FEE IS \$61.25

FILED

**Apr 03 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 # N93000001238 (5)
 1. Corporation Name
CHANTY LEARNING, INC.



Principal Place of Business 891 WEST 29TH STREET HIALEAH FL 33012	Mailing Address 891 WEST 29TH STREET HIALEAH FL 33012
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3. Date Incorporated or Qualified 03/11/1993
4. FEI Number 65-0419013
Applied For <input type="checkbox"/> Not Applicable

2. Principal Place of Business 21. Suite, Apt. #, etc. 22. City & State 23. Zip 24. Country	2a. Mailing Address 26. Suite, Apt. #, etc. 27. City & State 28. Zip 29. Country
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent DURAN, ROSEMARY 891 WEST 29TH STREET HIALEAH FL 33012	
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10. Name and Address of New Registered Agent	
81 Name FRANCISCO DURAN	85 Zip Code 33178
82 Street Address (P.O. Box Number is Not Acceptable)	
83 3977 Adra Avenue	
84 City Miami	85 State FL

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 with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: [Signature] DATE: **3/17/98**

12. OFFICERS AND DIRECTORS	
TITLE PD	<input type="checkbox"/> DELETE
NAME DURAN, ROSEMARY	
STREET ADDRESS 891 WEST 29TH STREET	
CITY-ST-ZIP HIALEAH FL	
TITLE SD	<input type="checkbox"/> DELETE
NAME PEREZ, VANESSA T	
STREET ADDRESS 2895 S.W. 33 COURT	
CITY-ST-ZIP MIAMI FL 33172	
TITLE TD	<input type="checkbox"/> DELETE
NAME DAYSI TANIA MIGUELIZ,	
STREET ADDRESS 8211 WEST 52 ST. #204	
CITY-ST-ZIP HIALEAH FL 33016	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE P.D.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME FRANCISCO DURAN	
1.3 STREET ADDRESS 3977 Adra Ave.	
1.4 CITY-ST-ZIP Miami FL 33178	
2.1 TITLE T.D.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME NORMA PRATTS	
2.3 STREET ADDRESS 887 West 29 St.	
2.4 CITY-ST-ZIP Hialeah Fl. 33012	
3.1 TITLE S.D.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME Daysi Tania Miguelez	
3.3 STREET ADDRESS 1100 S.W. 104 Court	
3.4 CITY-ST-ZIP Miami Fl. 33174	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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: [Signature] DATE: **3-17-98** **885-2490**

CR2E037 (10/97)