SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996 AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.) FLORIDA DEPARTMENT OF STATE NONPROFIT Sandra B. Mortham CORPORATION ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS FILED 1996 N95000001364 (7) **DOCUMENT #** 55 SEP -4 PM 1: 09 PUENTE EDUCATIONAL INSTITUTE, INC. Mailing Address Principal Place of Business 701 BRICKELL AVE. 701 BRICKELL AVE. **SUITE 1900 SUITE 1900** MIAMI FL 33131 3a. Date of Last Report 3. Date Incorporated or Qualified MIAMI FL 33131 03/21/1995 Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required Suite, Ap \$5.00 May Be 22 6. Election Campaign Financing Added to Fees Trust Fund Contribution 28 Country 8. This corporation has liability for intangible tax under s. 199.032, 23 Yes X No Zip Florida Statutes 29 25 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent R1 Name **GUTIERREZ, NICOLAS J JR** 82 701 BRICKELL AVE. 83 **SUITE 1900** -MAMI FL 33131 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 registere 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 secept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (3/36) OFFICERS AND DIRECTORS 13. Change 12. DELETE 1.1 TITUE -ABALLIJR, 530., RAFAEL TITLE **FUENTES, TERESA** 12 NAME NAME % 701 BRICKELL AVE. SUITE 1900 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33131 1.4 CITY - ST - ZIP X Addition Change CITY-ST-ZIF DELETE 21 TITLE UEZ, ERIC A. TITLE ARRIZURIETA, JORGE L 2.2 NAME NAME % 701 BRICKELL AVE. SUITE 1900 2.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33131** 2. 4 CITY - ST - ZIP Addition Change CITY-ST-ZIF DELETE 31 TITLE TITLE GUTIERREZ, NICOLAS J JR 3.2 NAME NAME 5. Barryce Pr.,5tk. 1600 % 701 BRICKELL AVE. SUITE 1900 3.3 STREET ADDRESS STREET ADORESS 3.4. CITY - ST - ZIP MIAMI FL 33131 Addition Change CITY-ST-ZIF 4.1 TITLE DELETE TITLE 4.2 NAME NAME 43 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP Addition CITY-ST-ZIP Change DELETE 5 1 TITLE ITLE 5.2 NAME 5.3 STREET ADDRESS FFT ADDRESS 5.4 CITY - ST - ZIP BODOD LENGTON ST-ZIP DELETE 6.1 TITLE -09/13/96 - -01001--001 62 NAME ****122.50 **6.3 STREET ADDRESS** ADDRESS Too hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURI

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