**2004 NOT-FOR-PROFIT CORPORATION** ANNUAL REPORT (AR)

	ANNUAL R	EPORT (AR)	1711014		DOSHED		
DOCUMENT # N97000001764  1. Entity Name				Mar(12, 2004 08:00 AM Secretary of State			
PHYL'S A	ACADEMY PLUS, INC.				,		
Principal Place of Business Mai		Mailing Address	· · · · · · · · · · · · · · · · · · ·				
4645 N SR #7 LAUDERDALE LAKES FL 33319 US		12361 NW 14TH ST PLANTATION FL 33322 US		E IMMITIAL MEM S	BIIF INGIL NGIYA KENII NNIII NNIII SEFER IYEY INNIN NI	III BIBhar et sear	
2. Principal Place of Business		3. Mailing Address					
Suite, Apt #, etc.		Suite, Apt #, etc.		MOORE CR2E037 (11/03)			
City & State		City & State		4. FEI Number 65	5-0737239	Applied For Not Applicable	
Zip	Country	Zíp	Country	5. Certificate of Sta	tus Desired \$8.75	Additional	
	6. Name and Address of Current	Registered Agent		7. Name and Addr	ess of New Registered Agent		
BAPTISTE, CURTIS 12361 NW 14ST ST PLANTATION FL 33323			Street Address	Street Address (P.O. Box Number is Not Acceptable)			
			City		FL Zip C	Code	
9 The above	e named entity submits this statement fo	the nurness of changing its re	sistered office or majet	ored agent or both in V	/	čale	
the obliga	tions of registered agent.	The purpose of changing its re	gistered ombe di regist	ered agent, or bott, in t	ne state di Florida. Tam latilibal w	mis, and accept	
SIGNATURE	Signature typed or printed name of registered agent	and late if applicable (NOTE I	Registered Agent signature requir	ed when reinstating)	DATE		
	FILE NOW: FEE IS \$61.25 Due By May 1, 2004		9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees Make Check Payable to Florida Department of State		
10.	OFFICERS AND DIF		11.	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTOR		
TITLE NAME	FULLER, DENISE	☐ Delete	TITLE NAME		☐ Chan UUUUU00087879	ge Addition	
STREET ADDRESS CITY-ST-ZIP	SUNRISE FL 33323		STREET ADDRESS CITY-ST-ZIP	03/12/04-80049-007 228.75		a.5	
TITLE	DST LUDLOW, BAILEY	☐ Delete	TITLE		☐ Chan	ge 🔲 Addition	
NAME STREET ADDRESS CITY - ST- ZIP	431 NE 210 CIR TERR, APT 24-20 MIAMI FL 33179	1	NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME	DP FREMPONG-BOADU, PHYLLIS	☐ Delete	TITLE		☐ Chan	ge Addition	
STREET ADDRESS CITY-ST-ZIP	5540 KINGS HIGHWAY BROOKLYN NY 11203	<u></u>	STREET ADDRESS CITY-ST-ZIP				
TITLE NAME		☐ Delete	TITLE		☐ Chan	ge 🔲 Addition	
STREET ADDRESS			NAME STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP				
TITLE NAME		☐ Delete	TITLE NAME		☐ Chan	ge Addition	
STREET ADDRESS CITY-ST-ZIP			STREET ADORESS CITY-ST-ZIP				
TITLE NAME		☐ Delete	TITLE NAME		☐ Chan	ge	
STREET ADDRESS			STREET ADDRESS				
	certify that the information available with	this filing does not smallfulfer to	CITY-ST-ZIP	Soction 140 ATVOVA	eide Chahatan I familiar et al. e.	na lafa	
indicated of the co	certify that the information supplied with d on this report or supplemental report is irporation or the receiver or trustee empi	tries ming does not quality for to true and accurate and that my owered to execute this report a with all other like tempowered	signature shall have the s required by Chapter 6	e same legal effect as if 17, Florida Statutes; and	made under oath; that I am an off that my name appears in Block 1	icer or director 0 or Block 11 if	

SIGNATURE: \_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNENG OFFICER OR DIRECTOR

3 4 01 954 214 6033
Date Daytone Phone \*