

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 26, 2004
Secretary of State**

DOCUMENT# N97000004292

Entity Name: HERITAGE INSTITUTE FOR EDUCATION, INCORPORATED

Current Principal Place of Business:

10701 SW 146 COURT
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

10701 SW 146 COURT
MIAMI, FL 33186

New Mailing Address:

FEI Number: 65-0776623 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATHMAN, RONALD C ESQ.
8900 S.W. 107TH AVENUE
MIAMI, FL 33176 US

Name and Address of New Registered Agent:

SAMRA, ABDUL H DR.
14510 SW 35TH STREET
MIRAMAR, FL 33027 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: ABDUL H. SAMRA 04/26/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SAMRA, ABDUL H
Address: 17431 SW 35 STREET
City-St-Zip: MIRAMAR, FL 33024

Title: SD () Delete
Name: ABBARA, MUHAMMAD R
Address: 10701 S.W. 146TH COURT
City-St-Zip: MIAMI, FL 33186

Title: TD () Delete
Name: SAMRA, ABDUL H
Address: 17431 SW 35 STREET
City-St-Zip: MIRAMAR, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SAMRA, ABDUL H
Address: 17431 SW 35 STREET
City-St-Zip: MIRAMAR, FL 33027

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

Title: TD (X) Change () Addition
Name: SAMRA, ABDUL H
Address: 17431 SW 35 STREET
City-St-Zip: MIRAMAR, FL 33027

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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: ABDUL H SAMRA PD 04/26/2004
Electronic Signature of Signing Officer or Director Date