2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006
Secretary of State

DOCUMENT# N98000003002

Entity Name: FLORIDA INTERNATIONAL ACADEMY, INC.

Current Principal Place of Business:

7630 BISCAYNE BLVD
MIAMI, FL 33138 US

New Principal Place of Business:

Current Mailing Address:

1982 LEWIS TURNER BLVD
SUITE D
FORT WALTON BEACH, FL 32547 US

New Mailing Address:

FEI Number: 65-0839367 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MITCHELL, SONIA
7630 BISCAYNE BLVD
MIAMI, FL 33138 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: PHILLIPS, VANCE
Address: 3171 NW 135TH ST
City-St-Zip: OPA LOCKA, FL 33054

Title: PD ( ) Delete
Name: HALL, ANTHONY
Address: 16800 NW 2ND AVENUE STE 510
City-St-Zip: MIAMI, FL 33169

Title: VD ( ) Delete
Name: ALEXANDER, DONNIE L
Address: 839 SW 8TH STREET
City-St-Zip: HALLANDALE, FL 33009

Title: D ( ) Delete
Name: LUCIUS, WICKER
Address: 10085 NW 7TH COURT
City-St-Zip: MIAMI, FL 33150

Title: D ( ) Delete
Name: REID, JOY A
Address: 18749 SW 15TH STREET
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: ANDREWS, RUSSELL
Address: 2015 N.E. 120TH ROAD
City-St-Zip: NORTH MIAMI, FL 33181

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

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

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

Title: D (X) Change ( ) Addition
Name: SILVA, JACQUELINE
Address: 498 N.W. 165TH ST ROAD #406
City-St-Zip: NORTH MIAMI BEACH, FL 33169

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: ANTHONY HALL PD 04/24/2006

Electronic Signature of Signing Officer or Director — Date