FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEVARTMENT OF STATE Katherine Williels

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # N98000006148

1. Corporation Name

ONE ON ONE ENRICHMENT ACADEMY INC.

Principal Place of Business Mailing Address

2500 N. SR 7 LAUDERDALE LAKES FL 33313

2500 N. SR 7 LAUDERDALE LAKES FL 33313 FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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		_					7 be 199 90014 009 \$61.25			
2.	Principal Place of Busin	ness	2a.	Mailing Address			3. Data incorporated or Qualifed			
21			26			_	10/26/1998			
	Suite, Apt. #, etc.			Suite, Apt. #, etc			4. FEI Number 832259 Applied For Not Applicable			
22			27				650852 Not Applicable			
23	City & State		28	City & State			5. Certificate of Status Desired Fee Required			
24	Zip	Country 25	29	Zip	Count	try	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
	9. Name	and Address of C	urrent Regis	tered Agent		10. Name and Address of New Registered Agent				
						11	1 Name			
	BOYNTON, YVETTE 2500 N. SR 7						reet Address (P.O. Box Number is Not Acceptable)			
	LAUDERDALE LAKE	S FL 33313			[33	3			
						34	4 City FL 85 Zip Code			
11	· Pursuant to the provis	sions of Sections 61	7.0502 and 6	17,1508, Florida S	tatutes, the abo	ove-	ve-named corporation autimits this statement for the purpose of changing its registered			

runsuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutas, 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 familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

Sic	SNATURE				1
}		Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re	gletered Agent signature r	required when rematating) DATE	
12.		OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	N 12
TITLE		President DELETE	1.1 TITLE -D	111631 1160 1	Addition
NAM		Virte BOYN NA	12 NAME	Johnny Bayaton]
l	ET ADDRESS -ST-ZIP	President Vyrtfe Boyntun 2500 N.SR 7 Lauderds/eLsker	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	Zavderdile Likes F1.3531	7
TITLE	E	V- Page 1800 DELETE	21 TITLE 7)		Addition
NAM	E	Johnny Duynton DELETE	22 NAME	Yvetre Boynton	1
STRE	ET ADDRESS	- CAO 61:50 7	2.3 STREET ADDRESS		1
СПУ	-ST-ZIP	2 Cauder dik Likes Fli 3 331	2.4 CITY-ST-ZIP	2500 N. SE7 Landerdille la	Kely
TITLE	τ	CONSTANCE Stephens DELETE	3.1 TITLE	Proper Boynton Change [Addition
NAM	E y	2508 W. SR 7	3.2 NAME	ecus N. Sr. 7	[
STRE	EET ADDRESS	Lauderdile Like F1. 333 B	3.3 STREET ADDRESS	1 1 2 1 1 1 1 1 1 200	_ !
CITY	-ST-ZIP	120866 14 TIKO 1-1, 33) 13	3.4. CITY-ST-ZIP	Landerdaly Lodges F1.333	12
TITLE		☐ DELETE	4.1 TITLE	☐ Change	Addition
NAM	F		4. 2 NAME)
STRE	ETADDRESS		4.3 STREET ADDRESS		1
CITY	-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE	Change [Addition
NAM	E		5.2 NAME		
STRE	ET ADDRESS		5.3 STREET ADDRESS		[
CITY	·ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	:	☐ DELETE	8.1 TITLE	Change C	Addition
NAMI	E		6.2 NAME	KE	1
STRE	ET ADORESS		6.3 STREET ADDRESS]
LOW	. ST. 7IP		6.4 CITY-ST-ZIP	1	

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 eath; 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 edgress, with all other like empowered.

SIGNATURE:

CR2E037 (11/98)