2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000040778

Entity Name: A+ EARLY LEARNING CENTERS, INC.

FILED Jan 21, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 10889 NORTH KENDALL DRIVE MIAMI, FL **Current Mailing Address: New Mailing Address:** 15422 S.W. 137TH PLACE MIAMI, FL 33177 FEI Number: 65-1000923 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FOX', ROBERTA ESQ FOX, ROBERTA ESQ. 2900 SW 28TH TERRACE 2900 SW 28TH TERRACE 7TH FLOOR 7TH FLOOR MIAMI, FL 33133 US MIAMI, FL 33133 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: ROBERTA F. FOX 01/21/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition SANCHEZ, LINDA C Name: Name: 15422 SW 137TH PLACE Address: Address: City-St-Zip: MIAMI, FL 33177 City-St-Zip: Title: CEO Title: () Delete () Change () Addition Name: SANCHEZ, LINDA C Name: 15422 SW 137TH PLACE Address: Address: MIAMI, FL 33177 City-St-Zip: City-St-Zip: Title: Title: (X) Delete () Change () Addition ANDERSEN, OLAF Name: Name: 15587 SW 138 CT Address: Address: City-St-Zip: MIAMI, FL 33177 City-St-Zip: Title: (X) Delete Title: () Change () Addition

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: LINDA CARMONA-SANCHEZ PD 01/21/2005

ANDERSEN, FULGENCIA

15587 SW 138 CT

MIAMI, FL 33177

Name: Address:

City-St-Zip: