

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000060616

FILED  
Apr 28, 2004  
Secretary of State

**Entity Name:** HIDDEN CURRICULUM EDUCATION, INC.

**Current Principal Place of Business:**

3725 S OCEAN DR #923  
HOLLYWOOD, FL 33019

**New Principal Place of Business:**

**Current Mailing Address:**

3725 S OCEAN DR #923  
HOLLYWOOD, FL 33019

**New Mailing Address:**

**FEI Number:** 65-1028628

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

DAVIS, ROZALIA W  
3725 S OCEAN DR #923  
HOLLYWOOD, FL 33019

**Name and Address of New Registered Agent:**

WILLIAMS, ROZALIA C  
3725 S OCEAN DR #923  
HOLLYWOOD, FL 33019

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:** ROZALIA C. WILLIAMS

04/28/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** DR. ( ) Delete  
**Name:** DAVIS, ROZALIA W  
**Address:** 3725 S OCEAN DR #923  
**City-St-Zip:** HOLLYWOOD, FL 33019

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** DR. (X) Change ( ) Addition  
**Name:** WILLIAMS, ROZALIA W  
**Address:** 3725 S OCEAN DR #923  
**City-St-Zip:** HOLLYWOOD, FL 33019

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.

**SIGNATURE:** ROZALIA C. WILLIAMS

DR.

04/28/2004

Electronic Signature of Signing Officer or Director

Date