

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P00000075218  
1. Entity Name  
A Learning Experience Academy, Inc.



FILED

03 JAN 30 AM 9:54

FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

400013270934  
02/28/03--01045--013 \*\*308.75

2. Principal Place of Business  
10048 N.W. 6th St.  
Suite, Apt. #, etc.  
City & State  
Pembroke Pines, FL  
Zip  
33024  
Country

3. Mailing Address  
Same  
Suite, Apt. #, etc.  
City & State  
City  
Zip  
Country

**2002-2003 UBR**

4. FEI Number  
65-1030025  
Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent  
Name  
Cazanas, Julian Jr.  
Street Address (P.O. Box Number is Not Acceptable)  
10048 N.W. 6th St.  
City  
Pembroke Pines FL Zip Code  
33024

8. 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. I am familiar with, and accept the obligations of registered agent.  
SIGNATURE *Julian Cazanas*  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering.) DATE 1/22/03

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	Cazanas, Julian Jr., PD	10048 N.W. 6th St.	Pembroke Pines, FL 33024
	Cazanas, Tania, VPD	10048 N.W. 6th St.	Pembroke Pines, FL 33024

**DO NOT WRITE IN THIS SPACE**

12. 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 report or supplemental report is true and accurate and that my 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Julian Cazanas*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE 1/22/03 Daytime Phone # 954 430-8088

CR2E034B (12/02)



**RAUL RICARDO JR.**  
CERTIFIED PUBLIC ACCOUNTANT

*Attachment 2 of 2*

January 22, 2003

Uniform Business Report  
Division of Corporation  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

Ref: A Learning Experience Academy, Inc.  
Document # P00000075218

To Whom It May Concern:

Please be advised that the above-mentioned Corporation never received their UBR (Uniform Business Report) form for 2002 and have not yet to receive the 2003 as well.

We are requesting that you waive the late fees and accept the enclosed downloaded form from your website (completely filled in for 2002 & 2003) along with a check in the amount of \$308.75 to cover for the initial renewal charges and a copy of the Certificate of Status.

Also, when the corporation was formed, one letter misspelled one of the words of the corporate name. Can you please change the word Academy to Academy?

If you have any questions, please feel free to contact me.

Sincerely,

Raul Ricardo, C.P.A.  
Lic. # AC0013416