## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P00000090424

Title:

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

Entity Name: LITTLE ANGELS LEARNING CENTER INC.

() Delete

7991 SUNRISE LAKES DR. N 209

( ) Delete

8595 SUNRISE LAKE BLVD., AP #211

FORT LAUDERDALE, FL 33322

ANDRUEJOL, HOWARD

GUERRERO, MARGARITA

SUNRISE, FL 33322

FILED Apr 29, 2002 8:00 AM Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
2901 W. OAKLAND PARK BLVD., STE. A-1 FT. LAUDERDALE, FL 33311	
Current Mailing Address:	New Mailing Address:
2901 W. OAKLAND PARK BLVD., STE. A-1 FT. LAUDERDALE, FL 33311	7991 SUNRISE LAKES DR. N209 SUNRISE, FL 33322
FEI Number: 65-1035095 FEI Number Applied For ( ) FEI Number	mber Not Applicable ( ) Certificate of Status Desired (X)
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
ANDRUEJOL, ANA P 7991 SUNRISE LAKE DR. NORTH, #209 SUNRISE, FL 33322 US	
The above named entity submits this statement for the purpose of in the State of Florida.	of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered Agent	Date
This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).  Election Campaign Financing Trust Fund Contribution ( ).	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: P ( ) Delete Name: ANDUEJOL, ANA P Address: 7991 SUNRISE LAKE DR. N., #201 City-St-Zip: SUNRISE, FL 33322	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

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

above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANA P. ANDRUEJOL P 04/29/2002

the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears

(X) Change ( ) Addition

(X) Change  $\ (\ )$  Addition

ALVAREZ, SHIRLEY C

1499 N.W. 91 AV. #11-212

ANDRUEJOL, MICHEL F

SUNRISE, FL 33322

CORAL SPRINGS, FL 33071

7991 SUNRISE LAKES DR. N209