2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2005
Secretary of State

DOCUMENT# P01000078832

Entity Name: BROWARD CAREER INSTITUTE, INC.

Current Principal Place of Business:

9145 TAFT ST
PEMBROKE PINES, FL 33024

New Principal Place of Business:

9143 TAFT ST
PEMBROKE PINES, FL 33024

Current Mailing Address:

9145 TAFT ST
PEMBROKE PINES, FL 33024

New Mailing Address:

9143 TAFT ST
PEMBROKE PINES, FL 33024

FEI Number: 02-0559764 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GUILLEN, PAULA
9145 TAFT ST
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

MIRANDA, JOSE
6901 CYPRESS ROAD
B-12
PLANTATION, FL 33317 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: JOSE MIRANDA 01/28/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: GUILLEN, PAULA G
Address: 9041 SW 54TH ST.
City-St-Zip: COOPER CITY, FL 33328

Title: S ( ) Delete
Name: GARCIA, MICHAEL
Address: 9125 TAFT ST.
City-St-Zip: PEMBROKE PINES, FL 33024

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GUILLEN, PAULA G
Address: 9041 SW 54TH ST.
City-St-Zip: COOPER CITY, FL 33328

Title: VP (X) Change ( ) Addition
Name: COLON, BEBA
Address: 134 E. RIVERBEND DR
City-St-Zip: WESTON, FL 33326

Title: T/S ( ) Change (X) Addition
Name: MIRANDA, JOSE
Address: 6901 CYPRESS ROAD, B-12
City-St-Zip: PLANTATION, FL 33317

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: PAULA GUILLEN P 01/28/2005
Electronic Signature of Signing Officer or Director Date