

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000098449

FILED
Apr 29, 2006
Secretary of State

Entity Name: ENHANCED SKILLS TRAINING ALTERNATIVES, INC.

Current Principal Place of Business:

400 CHURCH ST
SUITE 106
KISSIMMEE, FL 34741

New Principal Place of Business:

1121 TROTWOOD BLVD
WINTER SPRINGS, FL 32708

Current Mailing Address:

PO BOX 561414
ORLANDO, FL 328561414

New Mailing Address:

FEI Number: 59-3746635 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ERISMAN, VIRGINIA C
2667 FITZHUGH RD
WINTER PARK, FL 32792 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP (X) Delete
Name: NIEVES, MARIBEL
Address: 2031 BASIL DR
City-St-Zip: ORLANDO, FL 32837

Title: DS () Delete
Name: SANCHEZ DE MAUNEZ, MARIA D
Address: 1121 TROTWOOD BLVD
City-St-Zip: WINTER SPRINGS, DT 32708

Title: DT () Delete
Name: ERISMAN, VIRGINIA C
Address: 2667 FITZHUGH RD
City-St-Zip: WINTER PARK, FL 32792

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DP/T (X) Change () Addition
Name: ERISMAN, VIRGINIA C
Address: 2667 FITZHUGH RD
City-St-Zip: WINTER PARK, FL 32792

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: MARIA DEL CARMEN SANCHEZ DE MAUNEZ

Electronic Signature of Signing Officer or Director

DS

04/29/2006

Date