


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90419 040 ***150.00

DOCUMENT # P01000101276	
1. Entity Name ACADEMIA I, CORP.	

Principal Place of Business 2742 BISCAYNE BLVD. MIAMI, FL 33137	Mailing Address 2742 BISCAYNE BLVD. MIAMI, FL 33137
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2655 Le Jeune Road St 326 Coral Gables FL 33134

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04302004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1148627	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
GRISALES-RASINI, OSCAR 999 BRICKEL AVENUE SUITE 700 MIAMI, FL 33131	<i>Jaqueline Rodriguez 2655 Le Jeune Road St 326 Coral Gables FL 33134</i>

**DO NOT WRITE
IN THIS SPACE**

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 *Jaqueline Rodriguez 4/30/04* DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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	PD BRUKMAN, EDUARDO R 9781 EAST BAY HARBOR DRIVE BAY HARBOR ISLAND, FL 33154
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VSD DE BRUKMAN, VIVIAN NORA 9781 EAST BAY HARBOR DRIVE BAY HARBOR ISLAND, FL 33154
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Jaqueline Rodriguez (POD)* 305 350 0725 4/30/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #