

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000041543

FILED
Apr 24, 2007
Secretary of State

Entity Name: LICENSING EDUCATION, INC.

Current Principal Place of Business:

PO BOX 2327
FORT LAUDERDALE, FL 33301

New Principal Place of Business:

211 NE 16 AVE
FORT LAUDERDALE, FL 33301

Current Mailing Address:

P.O. BOX 2327
FORT LAUDERDALE, FL 33303

New Mailing Address:

FEI Number: 01-0735493 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOARD, MITCHELL S
628 DUVAL ST #1
KEY WEST, FL 33040 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: P () Delete
Name: HOARD, MITCHELL S
Address: 502 SE 18TH ST.
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: D () Delete
Name: OELKE, ROBERT
Address: 211 NE 16 AVE.
City-St-Zip: FORT LAUDERDALE, FL 33301

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HOARD, MITCHELL S
Address: 608 DUVAL ST.
City-St-Zip: KEY WEST, FL 33040

Title: () Change () Addition
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 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: ROBERT OELKE

D

04/24/2007

Electronic Signature of Signing Officer or Director

Date