## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000059415

City-St-Zip:

MIAMI, FL 33177

Entity Name: AMERICAN EDUCATION TOURS INC

FILED Apr 06, 2009 Secretary of State

Entity Nar	ne: AMERICA	AN EDUCATION TOURS INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
7479 SW 8 STREET MIAMI, FL 33144			9582 SW 40 ST. ROOM # 4 MIAMI, FL 33165	ROOM#4	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
7479 SW 8 MIAMI, FL			9582 SW 40 ST. ROOM # 4 MIAMI, FL 33165		
FEI Number:	42-1542659	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
PEREZ DE CAMINO, FERNANDO 17332 SW 149 COURT MIAMI, FL 33187 US			20651 SW 125 AVE.		
	named entity see of Florida.	submits this statement for the pu	rpose of changing its registere	ed office or registered agent, or both,	
SIGNATURE: LAZARO				04/06/2009	
	Electron	ic Signature of Registered Ager	nt	Date	
Election Can	npaign Financing	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () HERNANDEZ, L 20651 SW 125 MIAMI, FL 331	AVE,	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	, ,		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	T () PEREZ DE CAM 20651 SW 125		Title: Name: Address:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

SIGNATURE: LAZARO PEREZ DE CAMINO T 04/06/2009