

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000095232

FILED
Apr 29, 2010
Secretary of State

Entity Name: CENTER FOR CAREER TRAINING INC.

Current Principal Place of Business:

3286 N STATE RD 7
LAUDERDALE LAKES, FL 33319

New Principal Place of Business:

Current Mailing Address:

3286 N STATE RD 7
LAUDERDALE LAKES, FL 33319

New Mailing Address:

3296 N STATE RD 7
LAUDERDALE LAKES, FL 33319

FEI Number: 54-2114081

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUNFORD, MAUVA
3286 N. STATE RD. 7
FORT LAUDERDALE, FL 33319 US

Name and Address of New Registered Agent:

MUNFORD, MAUVA
3296 N. STATE RD. 7
FORT LAUDERDALE, FL 33319 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:

04/29/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D
Name: MUNFORD, MAUVA
Address: 3296 N. STATE RD. 7
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: D
Name: COSTANZO, SUZETTE
Address: 3296 N. STATE RD. 7
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: D
Name: CAMPBELL, ANDREA
Address: 3296 N. STATE RD. 7
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: D
Name: CAMPBELL, CLYTIE
Address: 3296 N. STATE RD. 7
City-St-Zip: LAUDERDALE LAKES, FL 33319

I hereby 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 all other like empowered.

SIGNATURE: MAUVA MUNFORD

D

04/29/2010

Electronic Signature of Signing Officer or Director

Date