

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000092518

FILED  
Jun 17, 2009  
Secretary of State

Entity Name: K&E FINANCIAL SERVICES & LEARNING CENTER INC.

## Current Principal Place of Business:

3426 FOWLER ST  
FORT MYERS, FL 33901

## New Principal Place of Business:

## Current Mailing Address:

7572 NW 1ST PLACE  
PLANTATION, FL 33317 US

## New Mailing Address:

FEI Number: 04-3779885

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EDOUARD, KINSONN  
7572 NW 1ST PLACE  
PLANTATION, FL 33317 US

## Name and Address of New Registered Agent:

EDOUARD, KINSONN J OWNER  
7572 NW 1ST PLACE  
PLANTATION, FL 33317 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: KINSONN EDOUARD

06/17/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: O ( ) Delete  
Name: EDOUARD, KINSONN  
Address: 7572 NW 1ST PLACE  
City-St-Zip: PLANTATION, FL 33317 US

Title: M ( ) Delete  
Name: ISNOR, WOSVELT  
Address: 7572 NW 1ST PLACE  
City-St-Zip: PLANTATION, FL 33317 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: M (X) Change ( ) Addition  
Name: EDOUARD, KINSONN J MANAGER  
Address: 7572 NW 1ST PLACE  
City-St-Zip: PLANTATION, FL 33317 US

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.

SIGNATURE: KINSONN.EDOUARD

M

06/17/2009

Electronic Signature of Signing Officer or Director

Date