

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000105517

FILED  
Mar 23, 2004  
Secretary of State

Entity Name: HIGHER EDUCATION PARTNERS, INC.

## Current Principal Place of Business:

2918 NOAH CIRCLE  
ST. CLOUD, FL 34772

## New Principal Place of Business:

3880 NE 15 AVENUE  
OAKLAND PARK, FL 33334 US

## Current Mailing Address:

2918 NOAH CIRCLE  
ST. CLOUD, FL 34772

## New Mailing Address:

3880 NE 15 AVENUE  
OAKLAND PARK, FL 33334 US

FEI Number: 20-0899920

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MATOS, ILIA YVETTE  
2918 NOAH CIRCLE  
ST. CLOUD, FL 34772 US

## Name and Address of New Registered Agent:

MATOS, ILIA Y  
3880 NE 15 AVENUE  
OAKLAND PARK, FL 33334 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: ILIA Y. MATOS

03/23/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PT ( ) Delete  
Name: MATOS, ILIA YVETTE  
Address: 2918 NOAH CIRCLE  
City-St-Zip: ST. CLOUD, FL 34772

Title: VSD ( ) Delete  
Name: MATOS, IDANNY E  
Address: 2918 NOAH CIRCLE  
City-St-Zip: ST. CLOUD, FL 34772

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition  
Name: MATOS, ILIA YVETTE  
Address: 3880 NE 15 AVENUE  
City-St-Zip: OAKLAND PARK, FL 33334 US

Title: VSD (X) Change ( ) Addition  
Name: MATOS, IDANNY E  
Address: 3880 NE 15 AVENUE  
City-St-Zip: OAKLAND PARK, FL 33334 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ILIA Y MATOS

PT

03/23/2004

Electronic Signature of Signing Officer or Director

Date