

2005 FOR PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 08, 2005
Secretary of State**

DOCUMENT# P03000116234

Entity Name: CENTER FOR ACADEMIC SUCCESS AND EXCELLENCE, INC.

Current Principal Place of Business:

New Principal Place of Business:

1030 NORTHWEST 182ND STREET
MIAMI, FL 33169

Current Mailing Address:

New Mailing Address:

1030 NORTHWEST 182ND STREET
MIAMI, FL 33169 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MAGWOOD, SHERRY L
1030 NORTHWEST 182ND STREET
MIAMI, FL 33169 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: SHERRY MAGWOOD

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MAGWOOD, SHERRY L
Address: 1030 NORTHWEST 182ND STREET
City-St-Zip: MIAMI, FL 33169 US

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

Title: VP () Delete
Name: WRIGHT, URSULA T
Address: 17940 NORTHWEST 14 AVENUE
City-St-Zip: MIAMI, FL 33169 US

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

Title: T () Delete
Name: WRIGHT, SUSIE E
Address: 17940 NORTHWEST 14 AVENUE
City-St-Zip: MIAMI, FL 33169 US

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 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: SHERRY MAGWOOD

P

10/08/2005

Electronic Signature of Signing Officer or Director

Date