

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000003323

FILED
Mar 24, 2012
Secretary of State

Entity Name: FAMILY, ADULT & CHILD ENRICHMENT SERVICES, INC.

Current Principal Place of Business:

3001 PONCE DE LEON BLVD.
SUITE 119
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

PO BOX 144615
CORAL GABLES, FL 331144615

New Mailing Address:

FEI Number: 20-0550648

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PADRON, FELIX O
3001 PONCE DE LEON BLVD.
SUITE 119
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PST
Name: PADRON, FELIX O
Address: PO BOX 144615
City-St-Zip: CORAL GABLES, FL 331144615

Title: VPD
Name: PADRON, FELIX O
Address: PO BOX 144615
City-St-Zip: CORAL GABLES, FL 331144615

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: FELIX O. PADRON

PST

03/24/2012

Electronic Signature of Signing Officer or Director

Date