2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Sep 19, 2005
Secretary of State

DOCUMENT# P04000029073

Entity Name: EDUCATION SOLUTIONS, P.A.

Current Principal Place of Business:

226 N. EUCLID AVE.
LAKE HELEN, FL 32744

New Principal Place of Business:

7432 WILES ROAD
CORAL SPRINGS, FL 33067

Current Mailing Address:

226 N. EUCLID AVE.
LAKE HELEN, FL 32744

New Mailing Address:

7432 WILES ROAD
CORAL SPRINGS, FL 33067

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

Name and Address of Current Registered Agent:

BLACKMAN, NORMA
226 N. EUCLID AVE.
LAKE HELEN, FL 32744 US

Name and Address of New Registered Agent:

GORDON, LES
1691 CORAL RIDGE DR.
CORAL SPRINGS, FL 33071 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: LES GORDON 09/19/2005
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: P ( ) Delete
Name: BLACKMAN, NORMA
Address: 226 N. EUCLID AVE.
City-St-Zip: LAKE HELEN, FL 32744

Title: P ( ) Delete
Name: GORDON, LES
Address: 8270 NW 40TH ST.
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GORDON, LES M
Address: 1691 CORAL RIDGE DR.
City-St-Zip: CORAL SPRINGS, FL 33071

Title: P (X) Change ( ) Addition
Name: MCINTYRE, ANTHONY
Address: 6801 SW 22ND COURT
City-St-Zip: MIRAMAR, FL 33023

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: LES GORDON P 09/19/2005
Electronic Signature of Signing Officer or Director Date