2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000095860

FILED Feb 28, 2007 Secretary of State

Entity Name: KNOW IT ALL TRAINING & CONTINUING EDUCATION SOLUTIONS, INC.

Current Principal Place of Business: New Principal Place of Business:

698 N MAITLAND AVE 4416 TWINVIEW LANE MAITLAND, FL 32751 ORLANDO, FL 32814

Current Mailing Address: New Mailing Address:

698 N MAITLAND AVE 4416 TWINVIEW LANE MAITLAND, FL 32751 ORLANDO, FL 32814

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MORIARTY, BETH A
698 N MAITLAND AVE
MAITLAND, FL 32751
US
MORIARTY, BETH A
4767 NEW BROAD STREET
ORLANDO, FL 32814
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: BETH A MORIARTY 02/28/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition MORIARTY, BETH A MORIARTY, BETH A Name: Name: 698 N MAITLAND AVE 4767 NEW BROAD STREET Address: Address: City-St-Zip: MAITLAND, FL 32751 City-St-Zip: ORLANDO, FL 32814

I hereby certify that the information supplied with this filing does not qualify for the 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: BETH A MORIARTY PST 02/28/2007