

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000136616

FILED
Jan 06, 2006
Secretary of State

Entity Name: FLORIDA INTERNATIONAL PROFESSIONAL INSTITUTE, INC.

Current Principal Place of Business:

200 S. SEMORAN BOULEVARD
ORLANDO, FL 32807

New Principal Place of Business:

14028 MYRTLEWOOD DR
ORLANDO, FL 32832

Current Mailing Address:

2116 THREE TREES CT.
207
ORLANDO, FL 32807

New Mailing Address:

17314 SUMMER OAK LANE
CLERMONT, FL 34711

FEI Number: 20-1798882

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REYES, MIRIAM E
2116 THREE TREES CT.
207
ORLANDO, FL 32807 US

Name and Address of New Registered Agent:

REYES, MIRIAM E
17314 SUMMER OAK LANE
CLERMONT, FL 34711 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: MIRIAM E. REYES

01/06/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: REYES, MIRIAM E
Address: 2116 THREE TREES CT. # 207
City-St-Zip: ORLANDO, FL 32807

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: REYES, MIRIAM E
Address: 17314 SUMMER OAK LANE
City-St-Zip: CLERMONT, FL 34711

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: MIRIAM E. REYES

P

01/06/2006

Electronic Signature of Signing Officer or Director

Date