

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000155446

FILED
Mar 27, 2006
Secretary of State

Entity Name: ARLENYS LEARNING CENTER, INC.

Current Principal Place of Business:

229 WEST 31 ST
HIALEAH, FL 33012

New Principal Place of Business:

8420 W. FLAGLER STREET
CORAL POINT PLAZA #116-117A
MIAMI, FL 33144

Current Mailing Address:

229 WEST 31 ST
HIALEAH, FL 33012

New Mailing Address:

8420 W. FLAGLER STREET
CORAL POINT PLAZA #116-117A
MIAMI, FL 33144

FEI Number: 20-1886122

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARRA, LUIS G
229 WEST 31 ST
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

PARRA, LUIS G
8420 W. FLAGLER STREET
#116-117A
MIAMI, FL 33144 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: LUIS PARRA

03/27/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CERVERA, SAHYLI
Address: 229 WEST 31 ST
City-St-Zip: HIALEAH, FL 33012

Title: DV () Delete
Name: MARTINEZ, ROLANDO
Address: 229 WEST 31 ST
City-St-Zip: HIALEAH, FL 33012

Title: DS () Delete
Name: PARRA, LUIS DO G
Address: 229 WEST 31 ST
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CERVERA, SAHYLI
Address: 8420 W. FLAGLER STREET
City-St-Zip: MIAMI, FL 33144

Title: DV (X) Change () Addition
Name: MARTINEZ, ROLANDO
Address: 8420 W FLAGLER STREET
City-St-Zip: MIAMI, FL 33144

Title: DS (X) Change () Addition
Name: PARRA, LUIS DO G
Address: 8420 W FLAGLER STREET
City-St-Zip: MIAMI, FL 33144

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: SAHYLI CERVERA

PD

03/27/2006

Electronic Signature of Signing Officer or Director

Date