## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

Electronic Signature of Registered Agent

## DOCUMENT# P05000077864

Entity Name: ACCESS PROFESSIONAL TRAINING, INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
6355 NW 36 ST #307 MIAMI, FL 33166		7971 NW 114 COURT MEDLEY, FL 33178		
Current Mailing Address:		New Mailing Address:		
6355 NW 36 ST #307 MIAMI, FL 33166		7971 NW 114 COURT MEDLEY, FL 33178		
FEI Number: 51-0545059	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:		Name and Address of N	Name and Address of New Registered Agent:	
MARIN, CARLOS A 255 ALHAMBRA CIR ST CORAL GABLES, FL 33				
The above named entity in the State of Florida.	submits this statement for the p	ourpose of changing its registered o	office or registered agent, or both,	
SIGNATURE:				

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

 Title:
 DPV ( ) Delete

 Name:
 RODRIGUEZ, LETICIA

 Address:
 255 ALHAMBRA CIR STE 705

 City-St-Zip:
 CORAL GABLES, FL 33134

 Title:
 D
 ( ) Delete

 Name:
 RODRIGUEZ, CRISTIAN

 Address:
 255 ALHAMBRA CIR STE 705

 City-St-Zip:
 CORAL GABLES, FL 33134

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

Title: DPV (X) Change ( ) Addition
Name: RODRIGUEZ, LETICIA
Address: 7971 NW 114 COURT
City-St-Zip: MEDLEY, FL 33178

Title: D (X) Change () Addition

Name: RODRIGUEZ, CRISTHIAN Address: 7971 NW 114 COURT City-St-Zip: MEDLEY, FL 33178

I hereby certify that the information supplied with this filing does not qualify 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: LETICIA RODRIGUEZ DPV 04/30/2008