

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Sep 07, 2007 8:00 am
Secretary of State

09-07-2007 90002 008 ***150.00

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1. Entity Name

THE DIVORCE COURSE, INC.



Principal Place of Business

8770 SUNSET DRIVE, #282
MIAMI, FL 33173

Mailing Address

8770 SUNSET DRIVE, #282
MIAMI, FL 33173

DO NOT WRITE IN THIS SPACE



08232007 No Chg-P CR2E034 (11/05)

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RICHERT, ELIZABETH K
8770 SUNSET DRIVE, #282
MIAMI, FL 33173

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	RICHERT, ELIZABETH K
STREET ADDRESS	8770 SUNSET DRIVE, #282
CITY-ST-ZIP	MIAMI, FL 33173
TITLE	V.P.
NAME	Richard, Yonnar T.
STREET ADDRESS	8770 Sunset Dr., #282
CITY-ST-ZIP	MIAMI, FL 33173
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/1/2007

Date

Daytime Phone #