

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000145961

FILED
Dec 07, 2006
Secretary of State

Entity Name: EDUCATIONAL TECHNOLOGY CONSULTANT, INC.

Current Principal Place of Business:

1540 N. ANDREWS AVE,
FT. LAUDERDALE, FL 33311

New Principal Place of Business:

1470 NE 24TH ST
WILTON MANORS, FL 33305

Current Mailing Address:

1540 N. ANDREWS AVE,
FT. LAUDERDALE, FL 33311

New Mailing Address:

1470 NE 24TH ST
WITON MANORS, FL 33305

FEI Number: 20-3819317

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUAREZ, MARIA I
1540 N. ANDREWS AVE,
FT. LAUDERDALE, FL 33311 US

Name and Address of New Registered Agent:

ADKIN, DANNY I
1470 NE 24TH ST.
WILTON MANORS, FL 33305 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: DANNY ADKIN

12/07/2006

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SUAREZ, MARIA I
Address: 1540 N. ANDREWS AVE.
City-St-Zip: FT. LAUDERDALE, F 33311

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SUAREZ, MARIA I
Address: 1470 NE 24TH ST
City-St-Zip: WILTON MANORS, FL 33305

Title: VP () Change (X) Addition
Name: ADKIN, DANNY
Address: 1470 NE 24TH ST
City-St-Zip: WILTON MANORS, FL 33305

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: MARIA SUAREZ

P

12/07/2006

Electronic Signature of Signing Officer or Director

Date