

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000157655

FILED  
Apr 20, 2006  
Secretary of State

Entity Name: ACHIEVE LEARNING CENTER, INC.

## Current Principal Place of Business:

1030 NE 12TH ST.  
OCALA, FL 34470

## New Principal Place of Business:

623 NE 27 AVENUE  
OCALA, FL 34470

## Current Mailing Address:

1030 NE 12TH ST.  
OCALA, FL 34470

## New Mailing Address:

623 NE 27 AVENUE  
OCALA, FL 34470

FEI Number: 20-4071224

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MOREL, JENNY  
1030 NE 12TH ST.  
OCALA, FL 34470 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: VELEZ, AUGUSTINE  
Address: 358 WADSWORTH AVE.  
City-St-Zip: NEW YORK, NY 10040

Title: D ( ) Delete  
Name: VELEZ, ANA B.  
Address: 358 WADSWORTH AVE.  
City-St-Zip: NEW YORK, NY 10040

Title: D ( ) Delete  
Name: MOREL, JENNY  
Address: 1030 NE 12TH ST.  
City-St-Zip: OCALA, FL 34470

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: VELEZ, AGUSTIN  
Address: 21 FORT WASHINGTON AVE. #1D  
City-St-Zip: NEW YORK, NY 10032

Title: D (X) Change ( ) Addition  
Name: BONIFACIO, ANA  
Address: 358 WADSWORTH AVE. #41  
City-St-Zip: NEW YORK, NY 10040

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JENNY MOREL

PRES

04/20/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date