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FILED  
Apr 09 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P05885 (9)  
1. Corporation Name  
EF INTERNATIONAL LANGUAGE SCHOOLS, INC.



Principal Place of Business

Mailing Address

204 LAKE ST  
BRIGHTON MA 02135  
US

204 LAKE ST  
BRIGHTON MA 02135  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/03/1985

4. FEI Number

77-0005740

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 One Education Street

26 One Education Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 8th floor

27 8th floor

City & State

City & State

23 Cambridge, MA

28 Cambridge, MA

Zip

Zip

24 02141-1805

29 02141

Country

Country

25 USA

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

11 TITLE ☐ Change ☐ Addition

NAME JULIAN, LOUISE  
STREET ADDRESS ONE MEMORIAL DR  
CITY-ST-ZIP CAMBRIDGE MA

12 NAME  
13 STREET ADDRESS One Education Street  
14 CITY-ST-ZIP Cambridge, MA 02141-1805

TITLE ☐ DELETE

21 TITLE ☐ Change ☐ Addition

NAME VP  
CASSERLOV, GORAN  
STREET ADDRESS ONE MEMORIAL DR  
CITY-ST-ZIP CAMBRIDGE MA

22 NAME  
23 STREET ADDRESS One Education Street  
24 CITY-ST-ZIP Cambridge, MA 02141-1805

TITLE ☐ DELETE

31 TITLE ☐ Change ☐ Addition

NAME SEMAN, MARK  
STREET ADDRESS 204 LAKE ST  
CITY-ST-ZIP BRIGHTON MA

32 NAME  
33 STREET ADDRESS One Education Street  
34 CITY-ST-ZIP Cambridge, MA 02141-1805

TITLE ☐ DELETE

41 TITLE ☐ Change ☐ Addition

NAME NILSSON, ANNA  
STREET ADDRESS 204 LAKE STREET  
CITY-ST-ZIP BRIGHTON MA

42 NAME  
43 STREET ADDRESS One Education Street  
44 CITY-ST-ZIP Cambridge, MA 02141-1805

TITLE ☐ DELETE

51 TITLE ☐ Change ☐ Addition

NAME

52 NAME

STREET ADDRESS

53 STREET ADDRESS

CITY-ST-ZIP

54 CITY-ST-ZIP

TITLE ☐ DELETE

61 TITLE ☐ Change ☐ Addition

NAME

62 NAME

STREET ADDRESS

63 STREET ADDRESS

CITY-ST-ZIP

64 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *Anna Nilsson* Anna Nilsson

3/27/98 (617) 619-1320

CR2E034 (10/97)