

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000015055

FILED
Apr 10, 2007
Secretary of State

Entity Name: GABLES PRESCHOOL, INC.

Current Principal Place of Business:

6466 S.W. 84 STREET
MIAMI, FL 33143

New Principal Place of Business:

990 S.W. 42 AVENUE
MIAMI, FL 33134

Current Mailing Address:

6466 S.W. 84 STREET
MIAMI, FL 33143

New Mailing Address:

990 S.W. 42 AVENUE
MIAMI, FL 33134

FEI Number: 20-4229859

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRANDA CABRERA, MADERLENE S
6466 S.W. 84 STREET
MIAMI, FL 33143 US

Name and Address of New Registered Agent:

GRANDA CABRERA, MADERLENE S
990 S.W. 42 AVENUE
MIAMI, FL 33134 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: MADERLENE GRANDA CABRERA

04/10/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P,D () Delete
Name: GRANDA CABRERA, MADERLENE S
Address: 6466 S.W. 84 STREET
City-St-Zip: MIAMI, FL 33143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D (X) Change () Addition
Name: GRANDA CABRERA, MADERLENE S
Address: 990 S.W. 42 AVENUE
City-St-Zip: MIAMI, FL 33134

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: MADERLENE S. GRANDA CABRERA

PRES

04/10/2007

Electronic Signature of Signing Officer or Director

Date