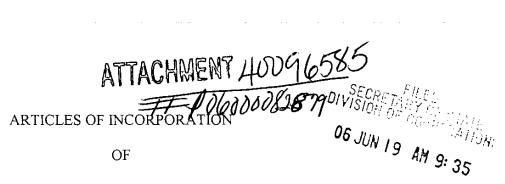
2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

May 01, 2007 8:00 am Secretary of State **DÖCUMENT # P06000082879** 1. Entity Name 05-01-2007 90051 016 ***158.75 TUTORING TODAY FOR EXCELLENCE INC. Principal Place of Business Mailing Address 505 ROCHESTER CT. **505 ROCHESTER CT.** 40036202 LAKELAND, FL 33809 LAKELAND, FL 33809 2. Principal Place of Business - No P.O. Bax # 225 N. SCENIC Hu 3. Mailing Address D. <u>o .</u> Suite, Apt. #, etc. Suite, Apt. #, etc. 04242007 CR2E034 (12/06) City & State FROST PROOF 4. FEI Number 20 - 50839 Applied For City & State ROOF ROST Not Applicable Country Zip 33843 \$8.75 Additional 凶 5. Certificate of Status Desired USA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent .ds LEWIS, CHEQUEITA 505 ROCHESTER CT. LAKELAND, FL 33809 33843 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 lager 4-24-07 SIGNATURE. (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOWIII FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. Change Delete Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-78P CITY-ST-ZIP Change ☐ Addition ☐ Defete TITLE JILE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-77P ☐ Delete MLE Change ☐ Addition TIME NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete ☐ Change TITLE TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE Detete TITI F NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

FILED



Tutoring Today For Excellence Inc.

THE UNDERSIGNED, being over the age of eighteen years, in order to form a corporation pursuant to the provisions of the Corporate Code, hereby certifies as follows:

Article I Identification

The name of the corporation, hereinafter referred to as the "Corporation," is Tutoring Today For Excellence Inc.

Article II Period of Existence

The period during which the corporation shall continue is perpetual.

Article III Registered Office and Registered Agent

The address of the initial registered office of the Corporation is 505 Rochester Ct., Lakeland, FL 33809 and the name and address of the initial registered agent therein and in charge thereof, upon whom process against the Corporation may be served, is Chequeita Lewis, 505 Rochester Ct., Lakeland, FL 33809. The mailing address for the Corporation is 505 Rochester Ct., Lakeland, FL 33809.

Article IV Purpose

The purpose of the Corporation is to engage in any or all lawful business for which corporations may be organized under the provisions of the General Corporation Law of Florida.

Article V Shares

The total authorized capital stock of the Corporation is 100 shares having a Par Value of \$1.00. All or any part of said shares may be issued by the Corporation from time to time and for such consideration as may be determined upon or fixed by the Board of Directors, as provided by law.

ATTACHMENT 4096565 Article VI #P06000082879 Incorporator's Address

The name and post office address of the Incorporator(s) and initial Director(s) of the Corporation is as follows:

STATE OF FLORIDA)
COUNTY OF POLK)

The forgoing Articles of Incorporation were acknowledged before me, this 15 day of 2006.

NOTARY PUBLIC State of Florida

My Commission Expires:

CAROL D. LAMONS
NOTARY PUBLIC - STATE OF FLORIDA
COMMISSION # DD205256
EXPIRES 06/15/2007
BONDED THRU 1-888-NOTARY1

ATTACHMENT # DOGOWOST 979

ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent to accept services of process for the above stated corporation at the place designated in this article, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

109 de 1- 1 Del-

Signature/Registered Agent

Date

FK 9: 35