2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000089890

Entity Name: SOUTH FLORIDA SPECIALIZED TRAINING ACADEMY, INC

FILED May 01, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

450 NORTH PARK ROAD 450 NORTH PARK ROAD

SUITE 601 SUITE 804

HOLLYWOOD, FL 33021 HOLLYWOOD, FL 33021

Current Mailing Address: New Mailing Address:

450 NORTH PARK ROAD 450 NORTH PARK ROAD SUITE 601 SUITE 804

HOLLYWOOD, FL 33021 HOLLYWOOD, FL 33021

FEI Number: 20-5163998 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ENGELS, GABRIELA ENGELS, GABRIELA 450 NORTH PARK ROAD 450 NORTH PARK ROAD SUITE 601 SUITE 804

HOLLYWOOD, FL 33021 US HOLLYWOOD, FL 33021 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: 05/01/2009

> 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

ENGELS, GABRIELA ENGELS, GABRIELA Name: Name: Address:

450 NORTH PARK ROAD, SUITE 601 450 NORTH PARK ROAD, SUITE 804 Address:

City-St-Zip: HOLLYWOOD, FL 33021 US City-St-Zip: HOLLYWOOD, FL 33021 US

Title: VΡ Title: VΡ (X) Change () Addition () Delete

Name: ENGELS, GABRIELA Name: ENGELS, GABRIELA

450 NORTH PARK ROAD, SUITE 601 450 NORTH PARK ROAD, SUITE 804 Address: Address: HOLLYWOOD, FL 33021 US HOLLYWOOD, FL 33021 US City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: () Delete

ENGELS, GABRIELA ENGELS, GABRIELA Name: Name: 450 NORTH PARK ROAD, SUITE 601 450 NORTH PARK ROAD, SUITE 804 Address: Address:

City-St-Zip: HOLLYWOOD, FL 33021 US City-St-Zip: HOLLYWOOD, FL 33021 US

Title: () Delete Title: (X) Change () Addition ENGELS, GABRIELA ENGELS, GABRIELA Name: Name:

Address: 450 NORTH PARK ROAD, SUITE 601 Address: 450 NORTH PARK ROAD, SUITE 804

City-St-Zip: HOLLYWOOD, FL 33021 US City-St-Zip: HOLLYWOOD, FL 33021 US

I hereby certify that the information supplied with this filing does not qualify 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: GABRIELA ENGELS **PRES** 05/01/2009