

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000147491

FILED
Apr 28, 2007
Secretary of State

Entity Name: DIVINE EDUCATIONAL ACADEMY ,INC.

Current Principal Place of Business:

2810 NW 209 TER
MIAMI, FL 33056

New Principal Place of Business:

6161 N.W. 22ND AVE
MIAMI, FL 33142 US

Current Mailing Address:

2810 NW 209 TER
MIAMI, FL 33056

New Mailing Address:

P.O. BOX 681563
MIAMI, FL 33168 US

FEI Number: 68-0639360

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOCKHART, ALBERT
2810 NW 209 TER
MIAMI, FL 33056 US

Name and Address of New Registered Agent:

LOCKHART, ALBERT
2810 NW 209 TERR
MIAMI, FL 33056 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:

04/28/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LOCKHART, ABENAA
Address: 2810 NW 209 TER
City-St-Zip: MIAMI, FL 33056

Title: VP () Delete
Name: LOCKHART, ALBERT
Address: 2810 NW 209 TER
City-St-Zip: MIAMI, FL 33056

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LOCKHART, ABENAA
Address: 2810 NW 209 TER
City-St-Zip: MIAMI, FL 33056 US

Title: VP (X) Change () Addition
Name: LOCKHART, ALBERT
Address: 2810 NW 209 TER
City-St-Zip: MIAMI, FL 33056 US

Title: S () Change (X) Addition
Name: ROLLE, CARLOS
Address: 1801 NW 186 ST
City-St-Zip: MIAMI, FL 33056 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: ABENAA LOCKHART

P

04/28/2007

Electronic Signature of Signing Officer or Director

Date