

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000052178

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** PICTURE ME LEARNING INC.

**Current Principal Place of Business:**

225 EAST DANIA BEACH BLVD.  
212  
DANIA BEACH, FL 33004

**New Principal Place of Business:**

317 SE 6TH STREET  
DANIA BEACH, FL 33004

**Current Mailing Address:**

225 EAST DANIA BEACH BLVD.  
212  
DANIA BEACH, FL 33004

**New Mailing Address:**

317 SE 6TH STREET  
DANIA BEACH, FL 33004

**FEI Number:** 20-8925184

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MAGLIOCCA, PATRICIA  
317 SE 6TH STREET  
DANIA, FL 33004 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MAGLIOCCA, PATRICIA  
Address: 317 SE 6TH STREET  
City-St-Zip: DANIA BEACH, FL 33004 US

I hereby 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 all other like empowered.

**SIGNATURE:** PATRICIA MAGLIOCCA

P

04/29/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date