2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000075292

Entity Name: ASSESSMENT COUNSELING & TESTING, INC.

FILED Mar 28, 2009 Secretary of State

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

3571 NW 85TH WAY, 306 9900 STIRLING ROAD SUNRISE, FL 33351 SUITE 233

COOPER CITY, FL 33328

Current Mailing Address: New Mailing Address:

3571 NW 85TH WAY, 306 5000 SW 94TH WAY SUNRISE, FL 33351 COOPER CITY, FL 33328

FEI Number: 15-2809035 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BARR, BRUCE E 5121 SW 90TH AVE., #3 COOPER CITY, FL 33328 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition () Delete Title: CIAVARELLA, JESSICA CIAVARELLA, JESSICA D DR. Name: Name: 5000 SW 94TH WAY Address: 5000 SW 94TH WAY Address: City-St-Zip: COOPER CITY, FL 33328 City-St-Zip: COOPER CITY, FL 33328

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: DR. JESSICA D. CIAVARELLA O 03/28/2009