2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000017049

Entity Name: FUVIS LEARNING CENTER, INC.

FILED Mar 24, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
6042 NW 6 PARKLANI	6 AVE D, FL 33067	US			
Current Mailing Address:			New Mailing Address:		
6042 NW 66 AVE PARKLAND, FL 33067		US			
FEI Number:		FEI Number Applied For (X) FEI Nu	ımber Not Appli	icable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
ST.LOUIS, VLADIMIR R 6042 NW 66 AVE PARKLAND, FL 33067		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.					
SIGNATUR	RE:				
	Electronic	Signature of Registered Agent		Date	
Election Carr	paign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () C ST.LOUIS, URIEL 2320 SW 60 WA MIRAMAR, FL 33	Y	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () E ST.LOUIS, FRED 6042 NW 66 AVE PARKLAND, FL		Title: Name: Address: City-St-Zip:	VP (X) Change () Addition ST.LOUIS, ISLANDE 6042 NW 66 AVE PARKLAND, FL 33067 US	
Title: Name: Address: City-St-Zip:	T () [JOASSAINT, ELII 6750 NW 6 ST MARGATE, FL 3		Title: Name: Address: City-St-Zip:	T (X) Change () Addition ST.LOUIS, SASHA 3896 W COMMERCIAL BLVD TAMARAC, FL 33309	
Title: Name: Address: City-St-Zip:	SD ()E ETIENNE, ISLAN 7201 CORAL BLY MIRAMAR, FL 33	DE /D	Title: Name: Address: City-St-Zip:	S (X) Change () Addition ETIENNE, DANIEL 7201 CORAL BLVD MIRAMAR, FL 33023 US	
Title: Name: Address: City-St-Zip:	PIERRE, MARIE 3520 NW 34 TER	Pelete R RKES, FL 33309 US	Title: Name: Address: City-St-Zip:	VS (X) Change () Addition FREDERIC, ST LOUIS 3896 W COMMERCIAL BLVD TAMARAC, FL 33309 US	
Title: Name: Address: City-St-Zip:	D ()E LADOUCEUR, M 1220 NE 162 ST MIAMI, FL 33162		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: URIEL ST LOUIS P 03/24/2009