

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000026315

FILED
May 01, 2009
Secretary of State

Entity Name: WELLINGTON GROUP INTERNATIONAL EDUCATORS CORP.

Current Principal Place of Business:

20835 NW 2ND AVENUE
MIAMI GARDENS, FL 33169

New Principal Place of Business:

3590 SOUTH STATE ROAD 7
222
MIRAMAR, FL 33023

Current Mailing Address:

20835 NW 2ND AVENUE
MIAMI GARDENS, FL 33169

New Mailing Address:

3590 SOUTH STATE ROAD 7
222
MIRAMAR, FL 33023

FEI Number: 26-2153686

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WELLINGTON, PATRICIA
20835 NW 2ND AVENUE
MIAMI GARDENS, FL 33169 US

Name and Address of New Registered Agent:

WELLINGTON, PATRICIA
3590 SOUTH STATE ROAD 7
222
MIRAMAR, FL 33023 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: PATRICIA WELLINGTON

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:

Title: P () Delete
Name: WELLINGTON, PATRICIA
Address: 20835 NW 2ND AVENUE
City-St-Zip: MIAMI GARDENS, FL 33169

Title: VP () Delete
Name: LOVE, GRACE
Address: 20835 NW 2ND AVENUE
City-St-Zip: MIAMI GARDENS, FL 33169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WELLINGTON, PATRICIA
Address: 3590 S. STATE ROAD 7 SUITE.222
City-St-Zip: MIRAMAR, FL 33023

Title: VP (X) Change () Addition
Name: LOVE, GRACE
Address: 3590 S. STATE ROAD 7
City-St-Zip: MIRAMAR, FL 33023

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: GRACE LOVE

VP

05/01/2009

Electronic Signature of Signing Officer or Director

Date