2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000040335

Entity Name: NEW HEAVEN LEARNING CENTER, INC.

FILED May 01, 2009 Secretary of State

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

12844 BIG SUR DR. 16246 SAGEBRUSH RD TAMPA, FL 33625 TAMPA, FL 33618

Current Mailing Address: New Mailing Address:

12844 BIG SUR DR. 16246 SAGEBRUSH RD TAMPA, FL 33625 TAMPA, FL 33618

FEI Number: 26-2524594 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

ROMAS, JOSE D HERNANDEZ, ALEXIS X 12844 BIG SUR DR. 12844 BIG SUR DR TAMPA, FL 33625 US TAMPA, FL 33625 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: ALEXIS X HERNANDEZ 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: HERNNDEZ, CRUZ R Name: HERNANDEZ, CRUZ R

 Address:
 12844 BIG SUR DR.
 Address:
 16246 SAGEBRUSH RD

 City-St-Zip:
 TAMPA, FL 33625
 City-St-Zip:
 TAMPA, FL 33618

Title: TD () Delete Title: TD (X) Change () Addition
Name: HERNNDEZ ANGEL R
Name: HERNNDEZ ANGEL R

 Name:
 HERNNDEZ, ANGEL R
 Name:
 HERNANDEZ, ANGEL R

 Address:
 12844 BIG SUR DR.
 Address:
 12844 BIG SUR DR.

 City-St-Zip:
 TAMPA, FL 33625
 City-St-Zip:
 TAMPA, FL 33625

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: CRUZ R HERNANDEZ PD 05/01/2009