

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000050159

FILED  
Jun 16, 2009  
Secretary of State

Entity Name: BETHEL EARLY LEARNING CENTER CORP.

## Current Principal Place of Business:

2000 NW 2ND AVENUE  
MIAMI, FL 33127

## New Principal Place of Business:

## Current Mailing Address:

585 NW 119 STREET  
MIAMI, FL 33168

## New Mailing Address:

FEI Number: 26-2683761

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MONCADA, KARLA V  
7340 NW 174 TERRACE - UNIT 101  
HIALEAH, FL 33015 US

## Name and Address of New Registered Agent:

AVILES, KAREN J  
585 NW 119 STREET  
MIAMI, FL 33168 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: KAREN J. AVILES

06/16/2009

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: AVILES, KAREN J  
Address: 585 NW 119 STREET  
City-St-Zip: MIAMI, FL 33168

Title: V ( ) Delete  
Name: MENEJIAS, MARIA B  
Address: 95 NW 45TH STREET  
City-St-Zip: MIAMI, FL 33127

Title: S ( ) Delete  
Name: MONCADA, KARLA V  
Address: 7340 NW 174 TERRACE UNIT 101  
City-St-Zip: HIALEAH, FL 33015

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: MONCADA, KARLA B  
Address: 7340 NW 174 TERRACE UNIT 101  
City-St-Zip: HIALEAH, FL 33015

Title: S (X) Change ( ) Addition  
Name: MENEJIAS, MARIA B  
Address: 95 NW 45TH STREET  
City-St-Zip: MIAMI, FL 33127

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: KAREN J. AVILES

P

06/16/2009

Electronic Signature of Signing Officer or Director

Date