

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000091720

Entity Name: B SMART TUTORING, INC.

FILED  
Apr 30, 2011  
Secretary of State

**Current Principal Place of Business:**

3087 TWINLEAF AVENUE  
DELTONA, FL 32725

**New Principal Place of Business:**

**Current Mailing Address:**

3087 TWINLEAF AVENUE  
DELTONA, FL 32725

**New Mailing Address:**

FEI Number: 27-3925413

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

TAYLOR, PETER W  
3087 TWINLEAF AVENUE  
DELTONA, FL 32725 US

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

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: TAYLOR, PETER W  
Address: 3087 TWINLEAF AVENUE  
City-St-Zip: DELTONA, FL 32725 US

Title: VP  
Name: STERLING, TEDDISON H  
Address: 920 HUNTERS CREEK DRIVE  
City-St-Zip: DELAND, FL 32720

Title: TREA  
Name: CALVO, RICARDO  
Address: 1019 E DE CARLO DR.  
City-St-Zip: DELTONA, FL 32725

I hereby 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 all other like empowered.

SIGNATURE: PETER WELLESLEY TAYLOR

PRES

04/30/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date