

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000095766

FILED
Jan 27, 2012
Secretary of State

Entity Name: TRAINING LICENSING CENTER, INC.

Current Principal Place of Business:

1275 W 47TH PL, SUITE #206
HIALEAH, FL 33012

New Principal Place of Business:

1275 W 47TH PL, SUITE #438
HIALEAH, FL 33012

Current Mailing Address:

1275 W 47TH PL, SUITE #206
HIALEAH, FL 33012

New Mailing Address:

1275 W 47TH PL, SUITE #438
HIALEAH, FL 33012

FEI Number: 27-4058853

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUINCOSES, ISANY
1275 W 47TH PL, SUITE #206
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

QUINCOSES, ISANY
1275 W 47TH PL, SUITE #438
HIALEAH, FL 33012 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: ISANY QUINCOSES

01/27/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRE
Name: QUINCOSES, ISANY
Address: 1275 W 47TH PL, SUITE #438
City-St-Zip: HIALEAH, FL 33012

Title: S
Name: ISANY, QUINCOSES
Address: 1275 W 47TH PL, SUITE #438
City-St-Zip: HIALEAH, FL 33012

Title: V
Name: RAMOS, JOSE M
Address: 1275 W 47TH PL, SUITE #438
City-St-Zip: HIALEAH, FL 33012

Title: V
Name: VAZQUEZ, ERNESTO
Address: 1275 W 47TH PL, SUITE #438
City-St-Zip: HIEALEAH, FL 33012

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: ISANY QUINCOSES

PRE

01/27/2012

Electronic Signature of Signing Officer or Director

Date