2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2007 8:00 am
Secretary of State
01-16-2007 90213 048 ****61.25

DOCUMENT # P31674

1. Entity Name
ASSOCIATION OF AMERICAN SCHOOLS IN SOUTH AMERICA, INC.

Principal Place of Business	Mailing Address
14750 NW 77 CT STE 210 MIAMI LKS, FL 33016 US	14750 NW 77 CT STE 210 MIAMI LKS, FL 33016 US

01092007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
12333 NW 18th Street	12333 NW 18th Street
Suite, Apt. #, etc.: Suite #5	Suite, Apt. #, etc.: Suite #5
City & State: Pembroke Pines, FL	City & State: Pembroke Pines, FL
Zip: 33026 Country: USA	Zip: 33026 Country: USA

4. FEI Number 58-1333760 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GRAGG, K. LAWRENCE WHITE & CASE 200 S. BISCAYNE BLVD., 50TH FLOOR MIAMI, FL 33131	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P JOHNSTON, WILLIAM DE LA HIGUERILLAS Y ALONDRA SECTOR MONETESERRIN, QE	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Executive Director Paul Poore 12333 NW 18th St. #5 Pembroke Pines, FL 33026	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ED MORRIS, JAMES W 14750 NW 77 CT., STE 210 MIAMI LAKES, FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice-President Philip Joslin Andres Ferreyra 4073 1636 - La Lucila - Buenos Aires, Argentina	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V BARBA, SUSAN MANUEL BENIGNO CUEVA N80-190 QUITO, ECUADOR,	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Craig Johnson SGAS-605 Conjunto E Lotes 34/37 Brasilia, DF CEP 70200-650 Brazil	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VAHEY, JEAN FINAL CALLE LA CINTA, LAS MERCEDES CARACUS,DF 1060 VENEZUELA,	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST SPINDLER, ERIC KM 1, CARRETERA VIA A LA TOSCANA MATURIN, EDO MONGAS VZ,	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BERGMAN, DON CALLE NIDO DE AGUILAS 14515 LO BARNECHEA, SANT. CHILE,	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: J. W. Maurer 1/10/07 954-436-4034
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #