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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000067083 (4)

YOU CAN DO IT EDUCATION, INC.

Principal Place of Business Mailino Address 600 SOUTH MAGNOLIA AVE 28751 SHADY LANE LAGUNA BEACH CA 82651-2033 TAMPA FL 33606 3. Date Incorporated or Qualified 3a. Date of Last Report 09/20/1993 07/17/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3207385 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #. etc. \$8.75 Additional \Box 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zip Country Ζip Country This corporation has liability for intangible tax under s. 199.032. Yes X No 24 25 29 Florida Statutes 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 BERNARD, MICHAEL E 6605 HEATHERTON COURT 82 TEMPLE TERRACE FL 33617 83 84 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiarywith and accept the obligations of, Section 607.0505, Florida Statules. SIGNATURE (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. ☐ DELETE 1.1 TITLE Change Addition TITLE BERNARD, MICHAEL E NAME 1.2 NAME 28751 SHADY LANE 6605 HEATHERTON, COURT 1.3 STREET ADDRESS STREET ADDRESS BEACH CA . 92651-2033 TEMPLE TERRACE FL-93617 1.4 C(TY - ST- Z(P CITY-ST-ZIP Change Addition DELETE TITLE 2.1 TITLE BERNARD, PATRICIA C NAME 2.2 NAME 6605-HEATHERTON COURT STREET ADDRESS 2.3 STREET ADDRESS SEACH CD 92651-2038 TEMPLE JERRACE FL-33617 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIF 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 41 TITLE 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CHY-\$1-7P DELETE Change Addition TITLE 61 THEE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that 1 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

CITY-ST-ZIP

4/28/97 (1111) 404 1

FILED

May 06 1997 8:00am

Secretary of State