FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED Apr 30 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # P93000067083 (4) YOU CAN DO IT EDUCATION, INC. Principal Place of Business Mailing Address 600 SOUTH MAGNOLIA AVE 28751 SHADY LANE LAGUNA BEACH CA 92651 TAMPA FL 33606 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/20/1993 2. Principal Place of Business
11. 5601 MARINER ST 2a. Mailing Address 4. FEI Number Applied For 59-3207385 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired SUITE 200 Fee Required City & State City & State \$5.00 May Be 6, Election Campaign Financing TAMPA Trust Fund Contribution Added to Fees 28 Zip Country ZID Country 8. This corporation owes or has paid the current year Intangible 33609 USA Yes Personal Property Tax due June 30. 25 30 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 BERNARD, MICHAEL E **600 SOUTH MAGNOLIA AVE** Street Address (P.O. Box Number is Not Acceptable)

5601 MARINER ST 82 STE. 190 ATAMPA FL 33606 83 SUITE 200 CITAMPA **5**5609 11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, 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. Lam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. MICHAEL E BERNARD 4 - 22 - 98 SIGNATURE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE Change TITLE BERNARD, MICHAEL E NAME CR2E034 28751 SHADY LANE STREET ADDRESS 1.3 STREET ADDRESS LAGUNA BEACH CA CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE BERNARD, PATRICIA C 2.2 NAME 28751 SHADY LANE STREET ADDRESS 2.3 STREET ADDRESS LAGUNA BEACH CA 2 4 CITY-ST-2IP CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST-ZIP Addition DELETE 4.1 TITLE Change TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 City - ST - ZIP CITY-ST-ZIP DELETE 5.1 TITLE Change Addition NAME 52 NAME STREET ADDRESS **53 STREET ADDRESS** CITY - ST - ZIP 5.4 CITY-ST-ZIP

DELETE

6.1 TITLE 6.2 NAME

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

14. Thereby 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 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 in Block 12 or Block 13 if changed, a on an attachment with an address. SIGNATURE:

TITLE

NAME STREET ADDRESS

CITY - ST - ZIP

4/21/98

Change

Addition