FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Saridra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996 **DOCUMENT #**

P94000025199 (8)

CORPORATE LEARNING ASSOCIATES, INC.

APPROVED

96 JAN 24 AM 11: 34 SECRETARY OF STATE TALLAHASSEE. FLORIDA



Principa' Place of Business Mailing Address						I HODINBOLING NOW HOLL BOOK BOOK BOOK BOOK BOOK BOOK HOLD HOLD HOLD HOLD HOLD HOLD HOLD HOLD		
20801 BISCAYNE BLVD. STE. 304 20801 BISCAYNE BLV N. MIAMI BEACH FL 33180 N. MIAMI BEACH FL 5								
						3. Date Incorporated or Qualified 04/01/1994	1	of Last Report 1/13/1995
2. Principal Pla	ico of Business	2a. Mailing Address				4. FEI Number		Applied For
21 Suite, Apt #		Suite, Apt. #, etc				65-0481721		Not Applicable
22	r, etc.	27 Suite, Apr. #, etc	i.			5. Certificate of Status Desired		\$8.75 Additional Fee Required
City & State	· · · · · · · · · · · · · · · · · · ·	City & State				6. Election Campaign Financing		\$5.00 May Be
23		28				Trust Fund Contribution		Added to Fees
Zip	Country	Ζ _' ρ	Count	ry		8. This corporation has liability for	- · ·	x under s. 199.032,
24	25 9. Name and Address of Cu	29	30			Florida Statutes Yes 10. Name and Address of New F	□ No	heart
	g, realite and Address of Qu	Trent neglatered Agent	8	11	Name	IV. Hattle and Address of Herr	egistoreu i	-90111
CACLAM	V CADV D		Ļ					
SASLAW, GARY R 20801 BISCAYNE BLVD. STE. 304				2	Street Addre	dress (P.O. Box Number is Not Acceptable)		
	II BEACH FL 33180		8	13		· · · · · · · · · · · · · · · · · · ·		
			8	14	City			85 Zip Code
n ya mesani nanana	F	05.00 1.		_		ation submits this statement for the pu	<u>FL</u>	
familiar wit SIGNATURE	ed agent, or both, in the State of Introduced the obligations of, \$ squared to a real or an extension of inspection.	Section 607.0505, Florida Stat	norized by the contacts. (NOTE: Registered As			d of directors. I hereby accept the app	ointment as	registered agent. I am
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFF		
1111	DP	DELETE		1 1 TITLE			[.	Change Addition
NAME	PREMER, HOWARD			1.2 NAME				
STHEET ADDRESS	13499 BISCAYNE BLVD S	SUITE 1			ADDRESS			
CHY ST ZIP	n miami beach fl DVST	DELETE		1.4 CHY-ST-ZIP 2 1 TITLE		- 500 -02706	204	76月月日本6
NAME	SASLAW, GARY R			2.2 NAME		米皮をよう	/30~~U	****200.00
STREET ADDRESS	20801 BISCAYNE BLVD S	SUITE 304	1	2 3 STREET ADDRESS		, - • · • · • · • · • · • · • · • · • · •	սս. սլյ	****200.00
CI*Y+S1+ZIP	N MIAMI BEACH FL		2 4 CITY	2 4 CITY - ST - 7IP				
Dir.t		[] DELETE	3 1 1171	£				Change 🔲 Addition
N4Mr			3 2 NAM	lE				
STREET ADDRESS					ADDRESS			
01*Y - ST - 71P		E3 BULL	34 CITY		F-ZIP		·····	Channa [7] Addition
Truf Karan		DELFTE	4. 1 TIJL				L	Change Addition
NAME STREET ADDRESS			4.2 NAM		ADDRESS			
CHY ST ZIP			4.4 CITY		ADDRESS L. ZIP			
. (41. 31 21		DELETE	5 1 TITL				٦	Change Addition
NAME			5.2 NAM				_	-
STEEL ACURESS			5.3 STRE	El A	ADDRESS			
CHY ST ZIP			5.4 CITY	· S1	1 - Z IP			
THAT		[] DELETE	6 1 THT	E	7			Change Addition
NAME			6 2 NAM	E				ρ
STEHLLADORESS			6.3 STRE	EET /	ADORESS			KW
OTY-ST-ZIP	v certify that the information (up)	ind with this till on is not estable	6 4 Cily			or the exemption stated in Section 119	07(2)(Id. Flo	side Statutes I further

course way coming man trace information praining as voluntarity turnished and does not quality for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated of this armount report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under each; 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 of the god, or an attachment with an address.

SIGNATURE:

VICE PRESIDENT SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-682-0200

Daytima Phone #