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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400043171

1. Corporation Name

YECHANLAZ INSTITUTO VOCACIONAL, INC.

| | • | | | | | | | |
|---|--|--|---|--|---|--|---|--|
| Principal Plac | ce of Business | Mailing Address | | | t inklinne isa satit minit anitt adits i | EMAIN MINSTE MEANING STEMS TOWN | (1980) (18) 1881 | |
| 651 S.W. 65TH | | 651 S.W. 65TH AVENUE | | | | | | |
| MIAMI FL 3314 | 14 | MIAM! FL 33144 | | | DO NOT WRITE | IN THIS SPACE | | |
| | | | | | 3. Date Incorporated or Qualifed | | | 1 |
| | | | | | 06/09/1994 | | | |
| 2. Principal P | Place of Business | 2a. Mailing Address | | | 4. FEI Number | A _i | oplied For |] , |
| 21 | 4 -4- | 26 | | | 65-0496312 | · ··········· | ot Applicable |] |
| Suite, Apt. | . #, etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | | Additional | |
| 22 City & Stat | te | City & State | | | 6. Election Campaign Financing | | equired | - |
| 23 | | 28 | | | Trust Fund Contribution | | May Be to Fees | |
| Zip | Country | Zip | Country | , | 8. This corporation owes the current | | | 1 |
| 24 | 25 | | 30 | | Personal Property Tax. | Yes | □No | |
| | 9. Name and Address of Currer | nt Registered Agent | | | 10. Name and Address of New Reg | istered Agent | |] |
| AI C | URIA, ARGELIA | • | 81 | Name | | • | | |
| | S.W. 65TH AVE. | | 82 | Street Addre | ess (P.O. Box Number is Not Acceptable |)) | | 1 |
| | MI FL 33144 | | 83 | | े हुए के जा कि पूर्व स्वापन के स्वापन के स्वापन के स्वापन के | * 22 / 92/12 / 10/13/ | 1 8 8 8 1 1 N | - |
| | | | 03 | | | 《注题数数》 | | |
| HIGH | | | 84 | City | ·20 × 10 × 20 × 10 × 10 × 10 × 10 × 10 × | 85 Zip | Code" | 4 |
| Mera | | | | 1 - | | | | |
| 11. Pursuant | to the provisions of Sections 607.050 | 2 and 607.1508. Florida Statutes | s. the abov | e-named corpo | pration submits this statement for the our | pose of changing its | registered | } |
| 11. Pursuant office or n | registered agent, or both, in the State | of Florida. Such change was aut | thorized by | the corporation | oration submits this statement for the pur n's board of directors. I hereby accept th | pose of changing its ne appointment as re | registered gistered | |
| 11. Pursuant office or reagent. I a | to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obliga | of Florida. Such change was aut | thorized by | the corporation | oration submits this statement for the purn's board of directors. I hereby accept the | pose of changing its ne appointment as re | registered gistered | |
| 11. Pursuant office or n agent. I a SIGNATURE | registered agent, or both, in the State am familiar with, and accept the obliga Signature, typed or printed name of registered agen | of Florida. Such change was autitions of, Section 607.0505, Floridate of applicable. (NOTE: F | thorized by da Statutes Registered Age | the corporation | n's board of directors. I hereby accept th | ne appointment as re | gistered | ١ |
| 11. Pursuant office or ragent. I a SIGNATURE | registered agent, or both, in the State am familiar with, and accept the obliga Signature, typed or printed name of registered agen OFFICERS AN | of Florida. Such change was autitions of, Section 607.0505, Floridations of the section of the s | thorized by da Statutes Registered Age 13. | the corporation | n's board of directors. I hereby accept the when reinstating) | DATE ERS AND DIRECTO | gistered ORS IN 12 | 1001 |
| 11. Pursuant office or ragent. I a SIGNATURE | registered agent, or both, in the State am familiar with, and accept the obligation of the state of registered age. OFFICERS AN PD | of Florida. Such change was autitions of, Section 607.0505, Floridate of applicable. (NOTE: F | thorized by da Statutes Registered Age 13. 1.1 TITLE | the corporation | n's board of directors. I hereby accept th | ne appointment as re | gistered | (14400) |
| 11. Pursuant office or ragent. I a SIGNATURE 12. TITLE | registered agent, or both, in the State am familiar with, and accept the obligation of the state of registered age of the state of the state of registered age of the state of | of Florida. Such change was autitions of, Section 607.0505, Floridations of the section of the s | thorized by da Statutes Registered Age 13. 1.1 TITLE 1.2 NAME | the corporation | n's board of directors. I hereby accept the when reinstating) | DATE ERS AND DIRECTO | gistered ORS IN 12 | 00 4/ (4/4/00) |
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14. I 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 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, or on an attachment with an address, with all other like empowered.

6.3 STREET ADORESS

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP



FILED

Feb 11, 1999 8:00am

Secretary of State

02-11-1999 90037 003 ***150.00