

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000043171

**FILED**  
**Jan 08, 2012**  
**Secretary of State**

**Entity Name:** YECHANLAZ INSTITUTO VOCACIONAL, INC.

**Current Principal Place of Business:**

651 S.W. 65TH AVENUE  
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MIAMI, FL 33144

**New Principal Place of Business:**

6617 S.W.8TH ST.  
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MIAMI, FL 33144

**Current Mailing Address:**

651 S.W. 65TH AVENUE  
MIAMI, FL 33144

**New Mailing Address:**

FEI Number: 65-0496312      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

ALCURIA, ARGELIA  
651 S.W. 65TH AVE.  
MIAMI, FL 33144    US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: ALCURIA, ARGELIA  
Address: 651 S.W. 65TH AVE.  
City-St-Zip: MIAMI, FL 33144

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ARGELIA ALCURIA

PD

01/08/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date