2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000060179

MARTINEZ, SANTIAGO

MIAMI, FL 33155

7040 SW 24 STREET, APT. 509

Name:

Address:

City-St-Zip:

Entity Name: FLORIDA EDUCATION INSTITUTE, INC.

FILED Apr 12, 2008 Secretary of State

•			- · , · · · · ·			
Current P	rincipal Pla	ce of Business:	New Pri	New Principal Place of Business:		
5818 SW 8 MIAMI, FL		S				
Current N	lailing Addı	ress:	New Ma	New Mailing Address:		
9321 SW 4 #108 MIAMI, FL		S				
FEI Number	: 65-0527372	FEI Number Applied Fo	r () FEI Number Not A	pplicable ()	Certificate of Status Desired ()	
Name and	l Address o	f Current Registered Ag	jent: Name a	Name and Address of New Registered Agent:		
VALENTI, 9321 SW 4 #108 MIAMI, FL	RAMON 4 ST 33174 US					
	named enti e of Florida.	ty submits this statement	for the purpose of changing	g its registere	ed office or registered agent, or both,	
SIGNATUI	RE:					
	Electi	onic Signature of Registe	ered Agent		Date	
Election Car	mpaign Financ	ing Trust Fund Contribution	().			
OFFICER	S AND DIRE	ECTORS:	ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	DP VALENTI, RA 9321 SW 4 : MIAMI, FL 3	ST #108	Title: Name: Address: City-St-Zip):	() Change () Addition	
Title: Name: Address: City-St-Zip:	DV VALENTI, RI 11431 NW 3 MIAMI, FL 3	2 LANE	Title: Name: Address: City-St-Zip):	() Change () Addition	
Title: Name: Address: City-St-Zip:	DT VALENTI, BA 9420 SW 57 MIAMI, FL 3	TERRACE	Title: Name: Address: City-St-Zip):	() Change () Addition	
Title:	DS	() Delete	Title:	DS	(X) Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

Name:

Address:

City-St-Zip:

MARTINEZ, SANTIAGO

6318 SW 43 STREET

MIAMI, FL 33155

SIGNATURE: RAMON VALENTI PRES 04/12/2008