SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000029435 (1)

EDUCATIONAL SYSTEMS OF DADE COUNTY, INC.

Principal Place of Business

7236 SW 56 AVE. S. MIAMI FL 33143 Mailing Address

7236 SW 56 AVE. S. MIAMI FL 33143 APPROVED AND FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



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KELLOGG, LAWRENCE A 201 S. BISCAYNE BLVD., STE. 2600 MIAMI FL 33131-4338 84 City FL B5 Zip Code 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 registere 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, 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, 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, or both, in the State of Florida Statutes. SIGNATURE SIGNATURE DR OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS IN 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. CITY-ST-ZIP DARDICK, CAROL 12. NAME 13. SIRET ADDRESS 7236 SW 56 AVE. 13. SIRET ADDRESS 7236 SW 56 AVE. 23. SIRET ADDRESS 7236 SW 56 AVE. 24. CITY-ST-ZIP DR DR DR DR DR DR DR DR DR D	241 S 3 1.			10 pace			
201 S. BISCAYNE BLVD., STE. 2600 MIAMI FL 33131-4338 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 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 register of agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or prived rame of registered agent and bit if at phoetic Page 12. OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. OFFICERS AND DIRECTORS 14. THIS CONTROL IS SIRET ADDRESS 15. SIMIAMI FL 33143 DADDICK, CAROL 7238 SW 56 AVE. S. MIAMI FL 33143 DADDICK, EUGENE 7236 SW 56 AVE. S. MIAMI FL 33143 DADDICK, STREET ADDRESS 7236 SW 56 AVE. S. MIAMI FL 33143 DADDICK, STREET ADDRESS 7236 SW 56 AVE. S. MIAMI FL 33143 DADDICK, STREET ADDRESS 7236 SW 56 AVE. S. MIAMI FL 33143 DADDICK, STREET ADDRESS 7236 SW 56 AVE. S. MIAMI FL 33143 DELETE 17. STREET ADDRESS 7236 SW 56 AVE. S. MIAMI FL 33143 DELETE 17. STREET ADDRESS 7236 SW 56 AVE. S. MIAMI FL 33143 DELETE 17. STREET ADDRESS 7236 SW 56 AVE. S. MIAMI FL 33143 DELETE 17. STREET ADDRESS 7236 SW 56 AVE. S. MIAMI FL 33143 DELETE 17. STREET ADDRESS 7236 SW 56 AVE. S. MIAMI FL 33143 DELETE 17. STREET ADDRESS 7236 SW 56 AVE. S. MIAMI FL 33143 DELETE 17. STREET ADDRESS 7236 SW 56 AVE. S. MIAMI FL 33143 DELETE 17. STREET ADDRESS 7236 SW 56 AVE. S. MIAMI FL 33143 DELETE 17. STREET ADDRESS 7236 SW 56 AVE. S. MIAMI FL 33143 DELETE 17. STREET ADDRESS 7236 SW 56 AVE. S. MIAMI FL 33143 DELETE 17. STREET ADDRESS 7236 SW 56 AVE. S. MIAMI FL 33143 DELETE 17. STREET ADDRESS 7236 SW 56 AVE. S. MIAMI FL 33143 DELETE 17. STREET ADDRESS 7236 SW 56 AVE. S. MIAMI FL 33143 DELETE 17. STREET ADDRESS 7236 SW 56 AVE. S. MIAMI FL 33143 DELETE 17. STREET ADDRESS 7236 SW 56 AVE. S. MIAMI FL 33143 DELETE 17. STREET ADDRESS 7236 SW 56 AVE. S. MIAMI FL 33143 DELETE 17. STREET ADDRESS 7236 SW 56 AVE. S. MIAMI FL 33143 DELETE	KE		ant negistered Agent	R1 Name	10, Name and Address of New He	gistered Agent	
MIAMI FL 33131-4336 B3 B4 City FL B5 Zip Code							
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14. I do 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 supplieriental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; 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.	informatic Lam an o	on indicated on this annual report or officer or director of the corporation of	supplemental annual report is tru or the receiver or trustee empower	e and accurate and that red to execute this report	my signature shall have the same lega-	l effect as if made under oath: tha	

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