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Mailing Address

PROFIT CORPORATION ANNUAL REPORT 1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P95000031432 (4)

APPLIED EDUCATIONAL RESOURCES INC.

FILED May 02 1997 8:00am Secretary of State



| 4811 & UNIVERSITY DRIVE SUITE 164 DAVIE FL 33328 | | 4611 S UNIVERSITY DRI SUITE 164 DAVIE FL 33328-3817 | **** | | | 9 Caralana da Caralida | 125 00 | la af la | al Possel | |
|---|---|---|---|------------------------------------|--|--|---------------------------------------|---|--|-----------|
| | | | | | | 3. Date Incorporated or Qualified 04/21/1995 | 3a. Date of Last Report 06/27/1996 | | | |
| 2. Principal Pi | lace of Business | 2a. Mailing Address | 2a. Mailing Address | | | 4. FEI Number | Applied For | | | |
| <u> </u> | | 26 | 26 | | | 65-0580571 | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | | | | |
| City & State | | City & State | — | | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | | | | |
| Zip 4 | Country 25 | | | | | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No | | | | |
| | 9. Name and Address of Cu | rrent Registered Agent | | | | 10. Name and Address of New Re | gistered / | gent | | |
| PET | RLAK, ROBERT J | | 8 | 11 | Name | | | | | |
| | 1 \$ UNIVERSITY DRIVE | | 8 | 2 | Street Addr | ess (P.O. Box Number is Not Acceptate | ıle) | | | |
| SUI | TE 164 | | | 1. | | ` | | | | |
| | /IE FL 33328 | | 8 | 13 | | | | | | |
| | | | 8 | 14 | City | | FL | 85 | Zip Code | |
| O Barraga | de the are injure of Continue CO7 | OFO2 and CO7 1500 Elevida Ctat | utoc the she | | named core | oration submits this statement for the p | | changi | na its reais | stered |
| office or r agent. I a | registered agent, or both, in the S am familiar with, and accept the o | late of Horida, Such change was | s authorized : | DV II | he corporat | ion's board of directors. I hereby accep | ol the app | ointmer | it as registe | ered |
| SIGNATURE | Signature, typed or printed name of registere | | | Agen: | signature requir | ed when reinstating) | DATE. | | ************************************** | |
| 12. | | AND DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFFIC | ERS AND | , , , , , , , , , , , , , , , , , , , | | |
| TITLE | 0 | ☐ DELFTE | 1,1 701. | | | | | L Cha | nge 🔲 A | Addilio |
| NAME | PETRLAK, ROBERT J | | 12 NAM | | ' | • | | | | |
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