

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000045924

FILED  
Apr 27, 2012  
Secretary of State

**Entity Name:** KILLIAN OAKS HOUSE OF LEARNING, INC.

**Current Principal Place of Business:**

10545 S.W. 97 AVENUE  
MIAMI, FL 33176 US

**New Principal Place of Business:**

**Current Mailing Address:**

10545 S.W. 97 AVENUE  
MIAMI, FL 33176 US

**New Mailing Address:**

**FEI Number:** 65-0595907      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

KLINE, KEVIN F ATTY.  
2600 SOUTH DOUGLAS ROAD  
902  
CORAL GABLES, FL 33134 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: VP  
Name: RICON, MERCEDES  
Address: 10545 S.W. 97 AVENUE  
City-St-Zip: MIAMI, FL 33156

Title: PT  
Name: RICON, MERECDES A  
Address: 10545 S.W. 97 AVENUE  
City-St-Zip: MIAMI, FL 33156

Title: S  
Name: RICON, DAVID  
Address: 10545 SW 97TH AVENUE  
City-St-Zip: MIAMI, FL 33176

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: MERCEDES A. RICON

PRES

04/27/2012

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

\_\_\_\_\_ Date