2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000082467

FILED Apr 27, 2009 Secretary of State

Entity Name: BARTENDERS TRAINING INSTITUTE OF AMERICA - BTIA, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
145 CHILIA PALM BEA	AN AVE ACH, FL 33480				
Current M	ailing Addres	s:	New Mailing Address	New Mailing Address:	
P.O. BOX : PALM BEA	2951 ACH, FL 33480				
FEI Number:	59-3525395	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
7951 SW 6 100	RONALD P STH STREET ON, FL 33324	US			
The above in the State	named entity s e of Florida.	ubmits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUF	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	S () OHANNESSIAN, P.O. BOX 2951 PALM BEACH, F		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () OHANNESSIAN, P.O. BOX 2951 PALM BEACH, F		Title: Name: Address: City-St-Zip:	()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.

SIGNATURE: ANTOINE OHANNESSIAN PD 04/27/2009