

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000049240

FILED
Mar 29, 2004
Secretary of State

Entity Name: MONTESSORI CHILDREN'S ACADEMY INC.

Current Principal Place of Business:

9718 S.W. 40 ST.
MIAMI, FL 33165

New Principal Place of Business:

Current Mailing Address:

9718 S.W. 40 ST.
MIAMI, FL 33165

New Mailing Address:

FEI Number: 65-0673767

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LLADO, FRANCISCA
4399 SW 89 AVE
MIAMI, FL 33165 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LLADO, FRANCISCA E
Address: 4399 SW 89TH AVE
City-St-Zip: MIAMI, FL 33165

Title: V () Delete
Name: LLADO, CHRISTINA
Address: 4399 SW 89 AVE
City-St-Zip: MIAMI, FL 33165

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: LLADO, FRANCISCA E
Address: 4399 SW 89TH AVE
City-St-Zip: MIAMI, FL 33165

Title: V.P. (X) Change () Addition
Name: ESCUDERO, CHRISTINA
Address: 2420 S.W.83 CT.
City-St-Zip: MIAMI, FL 33155

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: FRANCISCA E. LLADO

PRES

03/29/2004

Electronic Signature of Signing Officer or Director

Date