

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000064991 (8)

1. Corporation Name

YOUNG MINDS ACADEMY, INC.

Principal Place of Business

5454 NW 18TH ST
LAUDERHILL FL 33313

Mailing Address

5454 NW 18TH ST
LAUDERHILL FL 33313-3206

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

CHUCK MOGBO, P.A.
2331 N STATE RD 7
SUITE 124
LAUDERHILL FL 33313

81 Name

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 registered 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE CHUCK MOGBO, P.A.

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME RINEY, LAURA
STREET ADDRESS 2700 SOMERSET DR #Q404
CITY-ST-ZIP LAUDERDALE LAKES FL 33313

DELETE

TITLE DV
NAME ALLEN, EULA
STREET ADDRESS 2700 SOMERSET DR #Q404
CITY-ST-ZIP LAUDERDALE LAKES FL 33313

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

Change Addition

800002319808--0
-10/14/97--01036--001
****250.00 ****250.00

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

Change Addition

800002319808--0
-10/14/97--01036--002
****500.00 ****500.00

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

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 supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE [Signature]

APPROVED
AND
FILED

97 OCT 10 PM 2:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT 92

3. Date Incorporated or Qualified

08/05/1996

3a. Date of Last Report

N/A

4. FEI Number

65-0687545

Applied For

Not Applicable

5. Certificate of Status Desired

1

\$8.75 Additional
Fee Required

6. Election Campaign Financing

1

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

1

Yes

2

No

10. Name and Address of New Registered Agent

CR2E034 (9/96)