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

FILED

Apr 30 1997 8:00am

Secretary of State

A ANNIANNA ANN ANNIA MARKA MARKA ANDRI ANDRI ANDRI BARRA ARRAM MIRAM ARABE RANDA ARAB ANDRI

DOCUMENT # P9600066121 (0)

SMART TEACHER, INC.

Principal Place 5320 SUNSET MIAMI FL 3314		5320 SUNSET	Mailing Address 5320 SUNSET DRIVE MIAMI FL 33143-5825						
						 Date Incorporated or Qualified 08/07/1996 	3a. D	ate of Last F	Report
	Place of Business	2a, Mailing A	ddress			4. FFI Number		IAT T	pplied For
21		26				1 65-0686720	0	├	ot Applicable
Sulte, Apt.	#, etc.	Suite, Apt	. #, elc.			Configuration of Charles Burning			Additional
22		27				5. Certificate of Status Desired			equired
City & Stat	le	City & Sta	te		•	6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution			to Fees
— Žiρ			Zip Country			8. This corporation has liability for intangible tax under s. 199.032,			
24	25 29 30 9. Name and Address of Current Registered Agent			Florida Statutes Yes No					
43.47			<u>. </u>	81	Name	10. Name and Address of New Re	gistered	Agent	
	ERILAWYER CHARTERE	ט		• '	Name				
	ALMERIA AVENUE			82	Street Add	ress (P.O. Box Number is Not Acceptab	le)		
COF	RAL GABLES FL 33134			-					
				83					
				84	City			85 Zip	Code
dd Disassant	1. 10.7	007.0000			<u> </u>		FL	-	
office or r egent. I e	registered agent, or both, in im familiar with, and accept	ns 607.0502 and 607.1508, F In the State of Florida. Such cl It the obligations of, Section 6	orida Statules, the nange was author 07.0505, Florida S	abov ized bi Statute:	e-named corp y the corporal s.	poration submits this statement for the p tion's board of directors. I hereby accep	urpose o it the app	of changing it pointment as	ts registered registered
SIGNATURE	Storature, typed or printed pagin of	registered agent and title if applicable	(NOT) : Bross	wred An	ent eignature requi	red when reinstating)	DATE		
12.	· · · · · · · · · · · · · · · · · · ·	ICERS AND DIRECTORS		3.	o n ognasio roda	ADDITIONS/CHANGES TO OFFIC		D DIRECTOR	RS IN 12
TITLE	PSTD			.1 TITLE				Change	Addition
NAME	LARMAN, DARRYL S		1	.2 NAME					
STREET ADDRESS	5320 SUNSET DRIVE		1	.3 STHEFT	ADDRESS				
CITY-ST-ZIP	MIAMI FL 33143		.1	4 CHY-S	ST - 71P				
TITLE			DELETE 2	1 111LE				Change	Addition
NAME			2	2 NAME					
STREET ADDRESS			2	3 STREFT	ADDRESS		: 1		
CITY-ST-ZIP			2	4 CRY-:	ST-ZIP				
TITLE				1 HILE				Change	Addition
NAME			3	2 NAME					
STREET ADDRESS			3.	3 STREET	ADDRESS				
CITY-ST-ZIP			3.	4. CITY-:	ST-ZIP				
TITLE			DELETE 4.	1 TITLE				Change	Addition
NAME			4.	2 NAME					
STREET ADDRESS			4.	3 S1REET	ADDRESS				
CITY-ST-ZIP				4 CITY-5	31 - ZIP				
TITLE			DELETE 5.	1 THTLE				Change	☐ Addition
NAME			5.	2 NAME					
STREET ADDRESS :			5.	3 STREET	ADDRESS				
CITY-ST-ZIP				4 CITY- S	ST-ZIP				
TITLE			DELETE 6.	1 TALE				Change	☐ Addition
NAME			6.	2 NAME					
STREET ADDRESS			6.	3 \$TREE1	ADDRESS				
CITY ST. 7IP				a curvin	7 705				

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), Fiorida 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.

1 CANADAL CONTRACTO