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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000097791 (3)

PITTS-HUGHES LEARNING CONNECTION, INC.										
Principal Place of Business 1211 N.W. 100TH TERRACE		Mailing Address 1211 N.W. 100TH TERRACE				I HOORTOET IND HOUR BURKE BOUND BUIST BAR	A 179176 IBH			
MIAMI FL 33142		MIAMI FL 33147-1869								
						3.	Date Incorporated or Qualified 12/03/1996	3a. [Date of Last R	leport
— ·	lace of Business	2a. Mailing Address				4.	, FEI Number			oplied For
Suite. Apt. #. etc.		26 Suite, Apt. #, etc.				-			··	ot Applicable Additional
22		27			5.	. Certificate of Status Desired			equired	
City & State		City & State			6.	Election Campaign Financing			May Be	
Ζφ .	Country			Country		8.	Trust Fund Contribution Added to Fees 6. This corporation has liability for intangible tax under s. 199.032			
24	25	29	30			1_	Florida Statutes	Yes	□ No	
NT:	9. Name and Address of Currer	nt Registered Agent		81	Name	10.	, Name and Address of New R	egistered	I Agent	
PITTS, CLINTON J 4770 BISCAYNE BOULEVARD						 				
	TE 1130		82 Street Add			dress (F	P.O. Box Number is Not Accepts	ıbie)		
MIAN	WI FL 33137		ſ	83						
			ľ	84	City	***************************************		FI	85 Zip (Code
11. Pursuant	to the provisions of Sections 607.050)2 and 607 1508. Florida Sta	tutes, the at	xve	-named cor	rporatic	on submits this statement for the		of changing it	ts registered
office or fi	to the provisions of Sections 607.050 Togistered agent, or both, in the State am familiar with, and accept the oblig	of Florida, Such change was attions of, Section 607,0505.	is authorized Florida Stati	l by utes.	the corpore	ation's I	board of directors. I hereby acce	opt the ar	pointment as	registered
SIGNATURE										
Styrulous typed or printed name of registered agent and title 4 applicable (NOTE 12. OFFICERS AND DIRECTORS				Registered Agent signature requi			in reinstating) ADDITIONS/CHANGES TO OFF	DATE	ID DIRECTOR	25 IN 12
TITLE	D DELETE		1.1 Til	LE			ADDITIONS/CHANGES TO OFF	ICERS AI	Change	Addition
NAME	PITTS-HUGHES, B. GEANETTE		1.2 NA	IAME						
STREET ADDRESS	1211 N.W. 100TH TERRACE		1.3 ST	REET #	ADDRESS					
CHTY - ST - ZIP	MIAMI FL 33142	DELETE	1.4 CIT	******	I- ZIP				Change	Addition
THLE NAME		FT DECEIE	•	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS					change	Addition
STREET ADDRESS										
City - ST - ZiP			2 4 CI		· · · · · · · · · · · · · · · · · · ·					
TITLE		☐ DELETE	3.1 117	LE					Change	Addition
NAME			3.2 NA							
STREET ADDRESS			3.3 STI		ADDRESS					
CHY-S1-ZIP THLE		DELETE	4.1 TIT		1.41		# = ===	 -	Change	Addition
NAME			4, 2 NA	AME					_	
STREET ADDRESS			4.3 ST	REET /	address					
CHY-S1-ZIP		T 2 25 57 C	4.4 CIT		I-2iP			. 	——————————————————————————————————————	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
THILE		L DELETE	51 TIT		6	DII	Slistgy		L Change	Addition
NAME STREET ADORESS			52 NA		ADDRESS	M	3113147			
CHY-SI-Zir			5.4 CIT							
TOLE		DELETE	6,1 T/T						Change	Addition
NAME			6.2 NA	ME			20000219 -05/27/97010	307	'52	
STREET ADDRESS]		6.3 ST	REET /	ADDRESS		-05/27/97010)060)23	
C(1Y - \$1 - 7)P			6 4 CiT				***173.75		***	
14. I do heret informatic	by certify that the information supplie on indicated on this annual report or s	d with this filing does not qui supplemental annual report	salify for the distruction and a	exen	mption state	ed in Se at my s	ection 119.07(3)(i), Florida Statut	es. I furth	er certify that as if made un	the ider oath: that
l laman o	officer or director of the corporation of in Block 12 or Block 13 if changed, o	r the receiver or trustee emp	owered to e	XBCL	ute this repo	ort as re	equired by Chapter 607, Florida	Statutes;	and that my r	name

(305) 693-5179 Gayline Phone * 00007

FILED

May 15 1997 8:00am

Secretary of State