

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

FILED

May 11 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000103781 (6)

1. Corporation Name

INTERNATIONAL ADULT LEARNING CENTER, INC.



Principal Place of Business

Mailing Address

1290 EAST OAKLAND PARK BLVD., STE. 102-A
FT. LAUDERDALE FL 33334

1290 EAST OAKLAND PARK BLVD., STE. 102-A
FT. LAUDERDALE FL 33334

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/20/1996

4. FEI Number

65-0722613

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 4300 N.W. 60 STREET

26 4300 N.W. 60 STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 FORT LAUDERDALE, FL.

27 FORT LAUDERDALE, FL.

City & State

City & State

23

28

24 Zip 33319

25 Country U.S.A.

29 Zip 33319

30 Country U.S.A.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TORRES, EUGENIO R
1290 EAST OAKLAND PARK BLVD., STE. 102-A
FT. LAUDERDALE FL 33334

81 Name TORRES, Eugenio R.

82 Street Address (P.O. Box Number is Not Acceptable)
4300 N.W. 60 STREET

83

84 City FORT LAUDERDALE, FL 85 Zip Code 33319

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

Signature (typed or printed name of registered agent and place of application)

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PT ☐ DELETE

NAME TORRES, EUGENIO R
STREET ADDRESS 1891 SW 81 AVE., APT. 209
CITY-ST-ZIP N. LAUDERDALE FL 33068

TITLE VS ☐ DELETE

NAME ESPINOSA, FLORENCIA
STREET ADDRESS 10750 WASHINGTON ST., #305
CITY-ST-ZIP PEMBROKE PINES FL 33025

TITLE ☐ DELETE

NAME
STREET ADDRESS

TITLE ☐ DELETE

NAME
STREET ADDRESS

TITLE ☐ DELETE

NAME
STREET ADDRESS

TITLE ☐ DELETE

NAME
STREET ADDRESS

TITLE ☐ DELETE

NAME
STREET ADDRESS

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☒ Change ☐ Addition

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14. I 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: *Eugenio R. Torres* - 4/24/98 - (954) 958-0577

CR2E034 (10/97)