


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

0075006

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # P97000056837 1. Corporation Name PEMBROKE LAKES ACADEMY, INC.		

FILED

99 AUG 18 PM 1:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business 100 BRADLEY PL. PALM BEACH FL 33480	Mailing Address 100 BRADLEY PL. PALM BEACH FL 33480
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1595 NW 89TH TERRACE Suite, Apt. #, etc. 22 City & State 23 PEMBROKE PINES, FL Zip 24 33024 Country 25 USA		2a. Mailing Address 26 4750 OAKES RD. Suite, Apt. #, etc. 27 STE. M City & State 28 DAVIE, FL Zip 29 33314 Country 30 USA		3. Date Incorporated or Qualified 06/27/1997	
		4. FEI Number 65-0763874		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes the current year Intangible Personal Property. <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent KENNEY, TIMOTHY H 100 BRADLEY PL. PALM BEACH FL 33480		10. Name and Address of New Registered Agent 81 Name DAVID F. LEVY 82 Street Address (P.O. Box Number is Not Acceptable) 4750 OAKES RD. 83 STE. M 84 City DAVIE, FL 85 Zip Code 33314	
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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 DAVID F. LEVY (NOTE: Registered Agent Signature required when registering) DATE 7/2/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEVY, DAVID F 100 BRADLEY PL. PALM BEACH FL 33480	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 4750 OAKES RD, STE. M DAVIE, FL 33314
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JACIE, ARNALDO 100 BRADLEY PL. PALM BEACH FL 33480	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 0000002963350--0 -08/18/99--01064--001 ***2200.00 ***550.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 receive 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: DAVID F. LEVY 7/2/99 954J81.544J

CR2E034 (5/99)