2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000007209

FILED Dec 01, 2004 Secretary of State

Entity Nam	ne: THE LEA	RNING SCHOOL, INC.			
Current Pr	incipal Place	of Business:	New Principal Place	New Principal Place of Business:	
1360 KASIN OPA-LOCK	ASTREET A, FL 33054				
Current Ma	ailing Addres	s:	New Mailing Addres	New Mailing Address:	
1360 KASIM STREET OPA-LOCKA, FL 33054				1102 NW 180TH AVENUE PEMBROKE PINES, FL 33029	
FEI Number:	65-0806892	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
1840 SOUT 4TH FLOOF MIAMI, FL	33145 US	O STREET			
The above in the State		submits this statement for the p	urpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	E:				
	Electron	ic Signature of Registered Age	ent	Date	
		3(2)(b), F.S., the corporation did no	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PTD () ROBERTS, MO 1360 KASIM ST OPA-LOCKA, F	REET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VSD () ROBERTS, ALT 1360 KASIM ST OPA-LOCKA, F	REET	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MONA A. ROBERTS PTD 12/01/2004