

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000031888

FILED
Jan 11, 2005
Secretary of State

Entity Name: BELL EDUCATION CENTER, INC.

Current Principal Place of Business:

633 N.E. 167 STREET
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

1150 N E 125TH STREET
NORTH MIAMI, FL 33161

Current Mailing Address:

633 N.E. 167 STREET
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

1150 N E 125TH STREET
NORTH MIAMI, FL 33161

FEI Number: 65-0865683

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABRAHAM, GAIL L
633 N.E. 167TH STREET
NORTH MIAMI BEACH, FL 33162 US

Name and Address of New Registered Agent:

ABRAHAM, GAIL L
1150 N E 125TH STREET
NORTH MIAMI, FL 33161 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

01/11/2005

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: STAHL, MICHAEL
Address: 633 N.E. 167 STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: DTSV () Delete
Name: MARCANO-HOLDER, MERLIN
Address: 633 N.E. 167 STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: STAHL, MICHAEL
Address: 1150 N E 125TH STREET
City-St-Zip: NORTH MIAMI, FL 33161

Title: DTSV (X) Change () Addition
Name: MARCANO-HOLDER, MERLIN
Address: 1150 N E 125TH STREET
City-St-Zip: NORTH MIAMI, FL 33161

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: MICHAEL STAHL

Electronic Signature of Signing Officer or Director

PRES

01/11/2005

Date