2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2009
Secretary of State

DOCUMENT# P98000048472

Entity Name: SOUTH FLORIDA CAREER INSTITUTE, INC.

Current Principal Place of Business:

1230 WILSHIRE CIRCLE WEST
PEMBROKE PINES, FL 33027

New Principal Place of Business:

7615 DAVIE ROAD EXTENSION
DAVIE, FL 33024

Current Mailing Address:

1230 WILSHIRE CIRCLE WEST
PEMBROKE PINES, FL 33027

New Mailing Address:

FEI Number: 65-0840503 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CARDILICCHIA, TINA
1230 WILSHIRE CIRCLE WEST
PEMBROKE PINES, FL 33027 US

Name and Address of New Registered Agent:

CORTES, MARIA L
1230 WILSHIRE CIRCLE WEST
PEMBROKE PINES, FL 33027 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: MARIA L. CORTES 04/10/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CARDILICCHIA, TINA
Address: 1230 WILSHIRE CIRCLE WEST
City-St-Zip: PEMBROKE PINE, FL 33027

Title: VP ( ) Delete
Name: CORTES, MARIA L
Address: 1230 WILSHIRE CIRCLE WEST
City-St-Zip: PEMBROKE PINES, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CORTES, MARIA L
Address: 1230 WILSHIRE CIRCLE WEST
City-St-Zip: PEMBROKE PINE, FL 33027

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MARIA L. CORTES P 04/10/2009
Electronic Signature of Signing Officer or Director Date