

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 29, 2002 8:00 am**  
**Secretary of State**

02-14-2002 90009 001 \*\*\*150.00

**DOCUMENT # P98000069051**  
 1. Entity Name  
**BORN 2 LEARN, INC.**

Principal Place of Business <b>8794 NW 25TH STREET MIAMI FL 33178</b>	Mailing Address <b>8794 NW 25TH STREET MIAMI FL 33178</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number <b>65-0872820</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**CROSS, KEVIN R**  
**1930 TYLER ST.**  
**HOLLYWOOD FL 33020**

7. Name and Address of New Registered Agent

Name \_\_\_\_\_  
 Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_  
 City **FL** Zip Code \_\_\_\_\_

8. 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE <b>DIRECTOR / PRESIDENT</b> <input type="checkbox"/> Delete	NAME <b>PALACIOS, MARIA</b>	STREET ADDRESS <b>5266 NW. 114TH AVE. APT. 204</b>	CITY-ST-ZIP <b>MIAMI FL 33178</b>
TITLE <b>DIRECTOR / VICE PRESIDENT</b> <input type="checkbox"/> Delete	NAME <b>SUROS, CRISTINA</b>	STREET ADDRESS <b>5266 NW 114TH AVE. APT. 204</b>	CITY-ST-ZIP <b>MIAMI FL 33178</b>
TITLE <b>DIRECTOR / SECRETARY</b> <input type="checkbox"/> Delete	NAME <b>PALACIO DE ZAMBRANO, LINKA</b>	STREET ADDRESS <b>5266 NW 114TH AVE. APT. 204</b>	CITY-ST-ZIP <b>MIAMI FL 33178</b>
TITLE _____ <input type="checkbox"/> Delete	NAME _____	STREET ADDRESS _____	CITY-ST-ZIP _____
TITLE _____ <input type="checkbox"/> Delete	NAME _____	STREET ADDRESS _____	CITY-ST-ZIP _____
TITLE _____ <input type="checkbox"/> Delete	NAME _____	STREET ADDRESS _____	CITY-ST-ZIP _____

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE _____ <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME _____	STREET ADDRESS _____	CITY-ST-ZIP _____
TITLE _____ <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME _____	STREET ADDRESS _____	CITY-ST-ZIP _____
TITLE _____ <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME <b>Paret, Leonor</b>	STREET ADDRESS <b>1221 SW 132 CT</b>	CITY-ST-ZIP <b>MIAMI FL 33184</b>
TITLE _____ <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	NAME <b>Paret, Jette K.</b>	STREET ADDRESS <b>411 S. Hollybrook Dr #308</b>	CITY-ST-ZIP <b>Pembroke Pines, FL 33025</b>
TITLE _____ <input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME _____	STREET ADDRESS _____	CITY-ST-ZIP _____

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *Maria Palacios*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1-28-02** **305-629-9889**  
 Date Daytime Phone #

CR2E034 (9/01)