


**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P98000069051 1. Entity Name BORN 2 LEARN, INC.		
Principal Place of Business 8794 NW 25TH STREET MIAMI, FL 33178		Mailing Address 8794 NW 25TH STREET MIAMI, FL 33178
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.
City & State		City & State
Zip	Country	Zip
4. FEI Number 65-0872820		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 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 MARIA PALACIO Street Address (P.O. Box Number is Not Acceptable) 8794 NW 25 ST City MIAMI
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. I am familiar with, and accept the obligations of registered agents. SIGNATURE: MARIA PALACIO - President / 9/11/03 <small>Signature, typed or printed name of registered agent and date if applicable. (NONE: Registered Agent's signature required when necessary) DATE</small>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PALACIO, MARIA <input type="checkbox"/> Delete 5266 NW 114TH AVE. APT. 204 MIAMI, FL 33178	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SUROS, CRISTINA <input type="checkbox"/> Delete 5266 NW 114TH AVE. APT. 204 MIAMI, FL 33178	PD PALACIO, MARIA <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 5266 NW 114 AVE APT 204 MIAMI, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PALACIO DE ZAMBRANO, LLINKA <input type="checkbox"/> Delete 5266 NW 114TH AVE. APT. 204 MIAMI, FL 33178	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARET, LEANOR <input type="checkbox"/> Delete 1221 SW 132 CT MIAMI, FL 33184	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARET, JEHE K <input type="checkbox"/> Delete 411 S. HOLLYBROOK DR #309 HOLLYWOOD, FL 33026	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: Maria Palacio MARIA PALACIO - President 9/11/03 <small>SIGNATURE, AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date 305.629.9889 <small>Telephone #</small>

CR2E034 (1/0/02)

attachment
80149046

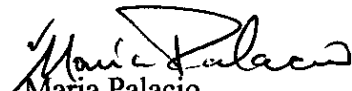
To: Florida Department of State
From: BORN2LEARN
EIN 65-0872820
DOC P98000069051
Date: 9/11/03

Sir or Madam,

We are sending you a check for \$150.00 for our 2003 Uniform Business Report. We are requesting you to waive any late charges. We had not received the filing form prior to being made aware of our reporting requirements from our new accountant Xavier Viteri, CPA, as noted in our report filing. we have changed our Registered Agent. Please call us if you have any questions or you may contact Mr. Viteri directly.

Xavier Viteri – Tel 305-665-3194
Maria Palacio – Tel 305-629-9889

Very Truly Yours,


Maria Palacio
President - BORN2LEARN