

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000074188

FILED  
Jan 25, 2004  
Secretary of State

Entity Name: ALPHA OMEGA ACADEMY, INC.

## Current Principal Place of Business:

4845 S.W. 148TH AVENUE  
DAVIE, FL 33330

## New Principal Place of Business:

## Current Mailing Address:

4845 S.W. 148TH AVENUE  
DAVIE, FL 33330

## New Mailing Address:

FEI Number: 65-1109334

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OUELLETTE, NANCY J  
4845 S.W. 148TH AVENUE  
DAVIE, FL 33330 US

## Name and Address of New Registered Agent:

SPINK AND OUELLETTE, P.A. ATTORNEYS  
100 SE 3RD AVE  
SUITE 2108  
FT LAUDERDALE, FL 33394 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: ADAM J OUELLETTE

01/25/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PS ( ) Delete  
Name: OUELLETTE, NANCY J  
Address: 4845 S.W. 148TH AVENUE  
City-St-Zip: DAVIE, FL 33330

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition  
Name: OUELLETTE, NANCY J  
Address: 4845 S.W. 148TH AVENUE  
City-St-Zip: DAVIE, FL 33330

Title: VPS ( ) Change (X) Addition  
Name: OUELLETTE, ADAM J  
Address: 100 SE 3RD AVE SUITE 2108  
City-St-Zip: FT LAUDERDALE, FL 33394 US

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: ADAM J OUELLETTE

VP

01/25/2004

Electronic Signature of Signing Officer or Director

Date