## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

Mailing Address

1776 CHUCUNANTAH RD.

PROFIT CORPORATION ANNUAL REPORT

1999

Principal Place of Business

**SIGNATURE:** 

1776 CHUCUNANTAH RD.



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Jul 14, 1999 8:00 am Secretary of State

07-14-1999 90006 016 \*\*\*150.00

DOCUMENT # P98000105946	
LINDA J. EADS, ED. D. EDUCATION CONSULTANT SERVI CES, INC.	58//88 - 90000 - 10

COCONUT GROVE FL 33133		COCONUT	COCONUT GROVE FL 33133				DO NOT WRITE IN THIS SPACE			
								3. Date Incorporated or Qualified		
								12/22/1998		Ì
6 Daineign d Di	lana of Dunk		2a Mailio					4. FEI Number		Applied For
	icipal Place of Business  2a. Mailing Address					65-0904/33			· -	Not Applicable
21										Additional
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired	•	Required
22 City & State			27					6. Election Campaign Financing		0 May Be
23 -	- 28 - · ·			_			Trust Fund Contribution		to Fees	
Zip		Country	Zip		Country			This corporation owes the current year		
24		25	29		30	•		· · · · · · · · · · · · · · · · · · ·	Yes [	☐ No
24	9. Name	and Address of Curren		Agent	11	$T_{-}$		10. Name and Address of New Registered Ag	ent	
81										
	S, LINDA J					82 Street Address (P.O. Box Number is Not Acceptable)				
		antah RD.				02	Super	Address (F.O. Dox Mulliper is 1100 1000 passey)		
COC	onut Gro	OVE FL 33133				83		A CONTRACTOR OF THE CONTRACTOR		
									^F   7ir	- Codo
						84	City	FL	85   Zip	p Code
11. Pursuant	to the provi	sions of sections 607,050	2 and 607,1508	3. Florida Statut	es, the ab	LLLLi -evoc	-named c	ornoration submits this statement for the purpose of change	ging its	registered
office or a	registered a	gent, or both, in the State	ı of Florida. Suc	ch change was a	autnorize	ad by	the corpo	oration's board of directors. I hereby accept the appointment	ient as r	registered
_	ım tamıllar v	with, and accept the obliga	ations of, secut	JN 6U7.UaUa, ⊢k	10fiua 3.a	Huito	<b>3.</b>			1
SIGNATURE.	Signature, typer	d or printed name of registered ager	nt and title if applicat	de. (N	4OTE: Registr	tered A	gent signatu	re required when reinstating) DATE		
12.			D DIRECTOR	· · · · · · · · · · · · · · · · · · ·	13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECT	TORS IN 12
TITLE				DELETE	1.1 TI	ITLE		President & Secretary	Change	Addition
NAME				****	1.2 N	IAME	1	Londa J. BAds		
STREET ADDRESS					1.3 S	TREET	T ADDRESS	1776 Chucunantab Rd.		
CITY-ST-ZIP						SITY-ST		MIAMI, 7 C 9 3/33		
TITLE				DELETE	2.1 TI	TLE		Treasure	Change	Addition
NAME					2.2 N	IAME		Harney C. Enda. 1.		}
STREET ADDRESS					2.3 87	TREET	T ADDRESS	Harray C. Eader S.		1
CITY-ST-ZIP					2.4 C	CITY-ST	T-ZIP	MIHWI: 7/ 33133		
TITLE	· · · · ·	<del></del>		DELETE	3.1 TI				Change	Addition
NAME	1				3.2 N	IAME				
STREET ADDRESS	ĺ	· .		,	3.3 5	3.3 STREET ADDRESS		• • • •		
CITY-ST-ZIP	ĺ					CITY-ST				
TITLE				DELETE	4.1 TI				Change	Addition
NAME				<b>—</b>	4.2 N	IAME				
STREET ADDRESS					4.3 \$	TREET	T ADDRESS			
CITY-ST-ZIP					4.4 C	CITY-ST	T-ZIP			
TITLE				DELETE	5.1 T				Change	e Addition
NAME					5.2 N	IAME				<del></del>
STREET ADDRESS					5.3 S	TREET	TADDRESS			
CITY-ST-ZIP	ĺ					CITY-ST				
TITLE				DELETE	6.1 T				Change	e Addition
NAME					6.2 N	NAME				<del>-</del>
STREET ADDRESS	-				6.3 S	TREET	TADORESS			
CITY-ST-ZIP				•		CITY-ST				
14 I hereby co	ertify that the	information supplied with	this filing does	s not qualify for	the exem	notion	a stated in	section 119.07(3)(i), Florida Statutes. I further certify tha	t the infe	ormation
indicated a	nn this annu	al report or supplemental	annual report i	is true and accu	urate and	that	my signa	ature shall have the same legal effect as if made under o	oatn, tha	itiam
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 12 or Block 13 if changed, or on an attachment with an address.										

1776 Chucunantah Road • Miami, FL 33133 (305) 856-3237 • Fax (305) 856-2483

July 6, 1999
Alepartment of State
Annual Reports Felings
Denision of Corporations
P.O. Box 6327
Tallahance, 71 32314

The enclased bleck # 153 in the amount of \$150 is in payment of the Corporate annual Report. Please be advised that I did not receive the first notice for payment.

Simila J. Lode, El. D. President

Inclasure