

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000029810

FILED
Jul 05, 2005
Secretary of State

Entity Name: THE ACADEMY OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

3100 SOUTH DIXIE HWY
COCONUT GROVE, FL 33133

New Principal Place of Business:

3100 SOUTH DIXIE HWY
SUITE 100
COCONUT GROVE, FL 33133

Current Mailing Address:

3100 SOUTH DIXIE HWY
COCONUT GROVE, FL 33133

New Mailing Address:

3100 SOUTH DIXIE HWY
SUITE 100
COCONUT GROVE, FL 33133

FEI Number: 65-0919361

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREZ, ALFONSO J
283 CATALONIA AVE 2ND FLOOR
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PEREZ, ALFONSO
Address: 283 CATALONIA AVE 2ND FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: VD (X) Delete
Name: SASTRE, JON
Address: 3100 SOUTH DIXIE HWY
City-St-Zip: COCONUT GROVE, FL 33133

Title: VSD () Delete
Name: PEREZ, CHRISTOPHER
Address: 3100 SOUTH DIXIE HWY
City-St-Zip: COCONUT GROVE, FL 33133

Title: VD (X) Delete
Name: TOSADO, BEN
Address: 3100 SOUTH DIXIE HWY
City-St-Zip: COCONUT GROVE, FL 33133

Title: VD () Delete
Name: PEREZ, ANDRE
Address: 3100 SOUTH DIXIE HWY
City-St-Zip: COCONUT GROVE, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: CHRISTOPHER PEREZ

MR

07/05/2005

Electronic Signature of Signing Officer or Director

Date