

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000044414

1. Entity Name

NORTH AMERICAN ENGLISH INSTITUTE, INC.

Principal Place of Business

8647 NORTH WEST 3RD STREET
MIAMI FL 33126

Mailing Address

8647 NORTH WEST 3RD STREET
MIAMI FL 33126

2. Principal Place of Business

2441 NW 93RD AVE

3. Mailing Address

8647 NW 3RD ST

Suite, Apt. #, etc.

103

Suite, Apt. #, etc.

2.

City & State

MIAMI-FL.

City & State

MIAMI-FL.

Zip

33122

Country

Dade

Zip

33126

Country

Dade

6. Name and Address of Current Registered Agent

RODRIGUEZ, EDDI
8647 NORTH WEST 3RD STREET
MIAMI FL 33126

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

EDDI RODRIGUEZ - President

Eddi Rodriguez

3-20-2001

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 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 PD
NAME RODRIGUEZ, EDDI
STREET ADDRESS 8647 NORTH WEST 3RD STREET
CITY-ST-ZIP MIAMI FL 33126 ☐ Delete

TITLE VD
NAME FERNANDEZ, JOSE
STREET ADDRESS 8647 NORTH WEST 3RD STREET
CITY-ST-ZIP MIAMI FL 33126 ☒ Delete

TITLE STD
NAME BRETOS, RAQUEL
STREET ADDRESS 8647 NORTH WEST 3RD STREET
CITY-ST-ZIP MIAMI FL 33126 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

Eddi Rodriguez PRESIDENT

3-20-2001

Date

305-592-9980

Daytime Phone #

0145791

CR2E034 (10/00)

FILED
Mar 22, 2001 8:00 am
Secretary of State

03-22-2001 90002 015 ***158.75

104400



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0921045

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional Fee Required