

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S97583

FILED
Mar 25, 2009
Secretary of State

Entity Name: ANGLO-AMERICAN SCHOOLS OF FLORIDA, INC.

Current Principal Place of Business:

112 S HIBISCUS DR HIBISCUS ISLAND
MIAMI, FL 331395130

New Principal Place of Business:

115 EAST PALM MIDWAY
MIAMI BEACH, FL 331395130

Current Mailing Address:

P O BOX 398570
MIAMI BEACH, FL 332398570 US

New Mailing Address:

115 EAST PALM MIDWAY
MIAMI BEACH, FL 331395130

FEI Number: 65-0304345

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANGEN, HILARY ESQ.
112 S. HIBISCUS DRIVE
MIAMI BEACH, FL 331395130 US

Name and Address of New Registered Agent:

LANGEN, HILARY ESQ.
115 EAST PALM MIDWAY
MIAMI BEACH, FL 331395130 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: HILARY LANGEN

03/25/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SUASSUNA, NEY ROBINS, ON
Address: 112 S HIBISCUS DR
City-St-Zip: MIAMI, FL 331395130

Title: D () Delete
Name: SUASSUNA, RODRIGO L.,
Address: 112 S HIBISCUS DR
City-St-Zip: MIAMI, FL 331395130

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SUASSUNA, NEY ROBINS, ON
Address: 115 EAST PALM MIDWAY
City-St-Zip: MIAMI BEACH, FL 331395130

Title: D (X) Change () Addition
Name: SUASSUNA, RODRIGO L.,
Address: 115 EAST PALM MIDWAY
City-St-Zip: MIAMI BEACH, FL 331395130

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: NEY SUASUNA

D

03/25/2009

Electronic Signature of Signing Officer or Director

Date