

DOCUMENT # V03800

1. Entity Name

THE LANGUAGE SOLUTION, INC.

Principal Place of Business

1700 N. DIXIE HWY.. #114

BOCA RATON FL 33432

Mailing Address

1700 N. DIXIE HWY.. #114

BOCA RATON FL 33432-1808

2. Principal Place of Business

Same

Suite, Apt. #, etc

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

ORDONEZ, JEAN G

816 NE 73RD ST

BOCA RATON FL 33487

Name

Street Address (if different from above)

City

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required)

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, 2000 Fee will be \$550.00

Make Check Payable to Department of State

11. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

PTS

ORDONEZ, JEAN G

816 NE 73RD ST.

BOCA RATON FL 33432

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 607 of the Florida Statutes, and that the information is true and accurate and that my signature shall have the effect of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607 of the Florida Statutes, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[REDACTED]

DO NOT WRITE IN THIS SPACE

CR2E034 (9/99)