

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V53537

FILED
Apr 25, 2005
Secretary of State

Entity Name: NEW PROFESSIONS TECHNICAL INSTITUTE, INC.

Current Principal Place of Business:

4000 WEST FLAGLER ST
MIAMI, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

4000 WEST FLAGLER ST
MIAMI, FL 33134 US

New Mailing Address:

FEI Number: 65-0361224

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ZAMORA, ENRIQUE
10 NW LE JEUNE ROAD
STE 600
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

URIARTE, JESUS
10 N.W. 42 AVE.
STE 610
MIAMI, FL 33126 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: JESUS URIARTE

04/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DVPT () Delete
Name: VAZQUEZ, JOSE,
Address: 4000 WEST FLAGLER ST.
City-St-Zip: MIAMI, FL 33134

Title: PC () Delete
Name: PRIETO, GERMAN L.,
Address: 4000 W. FLAGLER ST.
City-St-Zip: MIAMI, FL 33134

Title: D () Delete
Name: CARRENO, FRANCISCO J.,
Address: 4000 W. FLAGLER ST.
City-St-Zip: MIAMI, FL 33134

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:

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: JOSE VAZQUEZ

VPD

04/25/2005

Electronic Signature of Signing Officer or Director

Date