

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 12, 2005 08:00 AM
Secretary of State

DOCUMENT # V67475

1. Entity Name
THE LEARNING TREE PRE-SCHOOL, INC.



Principal Place of Business
**881 NORTHEAST 88TH STREET
MIAMI, FL 33138**

Mailing Address
**881 NORTHEAST 88TH STREET
MIAMI, FL 33138**



02022005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0361470

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**MARTIN, IVAN B.
13060 SOUTHWEST 106TH STREET
MIAMI, FL 33186**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Ivan B. Martin*

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

(NOTE: Registered Agent signature required when reinstating)

2/4/05
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

UN00000226335

02/12/05 00035 019 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

PD
**MARTIN, IVAN
13060 S.W. 106 ST.
MIAMI, FL 33186**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

SD
**PULASKI, LINDA
745 NE 146 STREET
NORTH MIAMI, FL 33181**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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TITLE
NAME
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CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Linda Pulaski*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/4/05
Date

305-7545005
Daytime Phone #