2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 28, 2005 08:00 AM Secretary of State

DOCUMENT # V72960 1. Entity Name H.I.S. ACADEMY/INSTITUTE, INC.	Secretary of State
Principal Place of Business 1259 10TH ST. LAKE PARK, FL 33403 US 1259 10TH ST. LAKE PARK, FL 33403 US	
DO NOT WRITE IN THIS SPACE O4162005 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For Not Applied For Not Applied For Status Desired Status Desired Status Desired Status Desired Status Desired Fee Required 6. Name and Address of Current Registered Agent	
GREEN, JOHN J. 1124 34TH STREET RIVIERA BEACH, FL 33404	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 Signature, typed or punited name of registered agent with the if applicable (NOTE Registered Agent signature required when relastating) DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.	cing \$5.00 May Be U00000337958 Added to Fees 04/28/05-80015-019 150.00
10. OFFICERS AND DIRECTORS TITLE P NAME GREEN PATRICIA, A STREET ADDRESS 1124-34TH ST CITY-ST-ZIP RIVIERA BCH, FL	
TITLE V NAME GREEN, JOHN J STREET ADDRESS 1124-34TH ST CITY-ST-ZIP RIVIERA BCH, FL	
TITLE S NAME GREEN, RENZI X STREET ADDRESS 1116-34TH ST CITY-ST-ZIP RIVIERA BEACH, FL 33404	DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE
TITLE NAME STREET AODRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filling 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 drugtee 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 arrattechment with an address, with all other like empowered. SIGNATURE: Communication supplied with this filling 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 is true and officer or director of the corporation or the receiver or director or di	