I hereby certify that the information indicated on this report or supplemental report is true a oath; that I am an officer or director of the corporation or the receiver or trustee empowere above, or on an attachment with all other like empowered.		
SIGNATURE: BAILA GANSBURG	VPS	04/20/2020

SIGNATURE: BAILA GANSBURG

Electronic Signature of Signing Officer/Director Detail

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:

Address

	Electronic Signature of Registered Agent			
Officer/Director Detail :				
Title	VPS	Title	D	
Name	GANSBURG, BAILA	Name	GANSBURG, MENACHEM	
Address	7530 LYONS RD	Address	1490 PRESIDENT ST.	
City-State-Zip:	COCONUT CREEK FL 33073	City-State-Zip:	BROOKLYN NY 11213	
Title	D			
The	D			
Name	MINA, SHEPHERD			

Name and Address of Current Registered Agent:

7373 NORTHWEST 45TH AVENUE

City-State-Zip: COCONUT CREEK FL 33073

GANSBURG, BAILA 7530 LYONS RD COCONUT CREEK, FL 33073 US

DOCUMENT# N97000007139

Entity Name: SOUTH FLORIDA ACADEMY OF LEARNING, INC.

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

3700 COCONUT CREEK PKWY COCONUT CREEK, FL 33066

Current Mailing Address:

3700 COCONUT CREEK PKWY COCONUT CREEK, FL 33066 US

FEI Number: 65-0635581

Certificate of Status Desired: Yes

Date

Date

FILED Apr 20, 2020 Secretary of State 8765165846CC

VPS