

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000001705

**Entity Name:** BOLA CHILDCARE & LEARNING CENTER INC.

**Current Principal Place of Business:**

70 NE 80 TERR  
MIAMI, FL 33138

**Current Mailing Address:**

P.O.BOX 380373  
MIAMI, FL 33238 US

**FEI Number: 65-0760793**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

AKINBIYI, SUNDAY  
18542 NW 23RD CT.  
MIAMI GARDENS, FL 33056 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title            PRES  
Name            AKINBIYI, SUNDAY  
Address        18542 NW 23RD CT.  
City-State-Zip: MIAMI GARDENS FL 33056

Title            DVP  
Name            AKINBIYI, JOSEPHINE  
Address        18542 NW 23RD CT.  
City-State-Zip: MIAMI GARDENS FL 33056

*I hereby 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 all other like empowered.*

**SIGNATURE: SUNDAY AKINBIYI**

**PRESIDENT**

**03/03/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date