

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006877

FILED
Jan 04, 2007
Secretary of State

Entity Name: EDUCATIONAL SERVICES CENTER, INC.

Current Principal Place of Business:

2 LOUIS AVE
MONSEY, NY 10952

New Principal Place of Business:

Current Mailing Address:

2 LOUIS AVE
MONSEY, NY 10952

New Mailing Address:

FEI Number: 13-3465691

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAFSON, MARTIN
8232 PLAYA DEL SUR BLVD
LAKE WORTH, FL 33467 US

Name and Address of New Registered Agent:

RAFSON, MARTIN
7025 ANTINORI LANE
BOYNTON BEACH, FL 33437 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: MARTIN RAFSON

01/04/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FRANKEL, ABRAHAM
Address: 2 LOUIS AVE
City-St-Zip: MONSEY, NY 10952

Title: D () Delete
Name: GEE, IRENE
Address: 2 LOUIS AVE
City-St-Zip: MONSEY, NY 10952

Title: PS () Delete
Name: FRANKEL, MARCIA
Address: 2 LOUIS AVE
City-St-Zip: MONSEY, NY 10952

Title: VPT () Delete
Name: FRANKEL, EMANUEL
Address: 2 LOUIS AVE
City-St-Zip: MONSEY, NY 10952

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:

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 Chapter 119, 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: MARCIA FRANKEL

PS

01/04/2007

Electronic Signature of Signing Officer or Director

Date