

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L97460

**Entity Name:** ON LOCATION EDUCATION (FLORIDA), INC.

**Current Principal Place of Business:**

400 COLUMBUS AVENUE  
SUITE 7 S  
VALHALLA, NY 10595

**Current Mailing Address:**

400 COLUMBUS AVENUE  
SUITE 7 S  
VALHALLA, NY 10595 US

**FEI Number:** 59-3031411

**Certificate of Status Desired:** No

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

CORPDIRECT AGENTS, INC  
1200 SOUTH PINE ISLAND ROAD  
MIAMI, FL 33324 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            DIRECTOR  
Name            SIMON, ALAN  
Address        400 COLUMBUS AVENUE  
                 SUITE 7 S  
City-State-Zip: VALHALLA NY 10595

Title            PRESIDENT  
Name            SIMON, ALAN  
Address        400 COLUMBUS AVENUE  
                 SUITE 7 S  
City-State-Zip: VALHALLA NY 10595

*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:** ALAN SIMON

**PRESIDENT**

**04/14/2017**

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

\_\_\_\_\_  
Date