

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000004918

**Entity Name:** LEARN TUTORING SERVICES, INC.

**Current Principal Place of Business:**

5100 SW 69 AVENUE  
MIAMI, FL 33155

**Current Mailing Address:**

P.O. BOX 431215  
SOUTH MIAMI, FL 33243 US

**FEI Number:** 27-4574279

**Certificate of Status Desired:** No

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

IRIZAR, JOHN  
5100 SW 69 AVENUE  
MIAMI, FL 33155 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            P  
Name            IRIZAR, JOHN  
Address        5100 SW 69 AVENUE  
City-State-Zip: MIAMI FL 33155

*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:** JOHN IRIZAR

**PRESIDENT**

**04/09/2016**

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

\_\_\_\_\_  
Date