

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000092261

FILED
Feb 14, 2005
Secretary of State

Entity Name: MIND SPECTRUM INSTITUTE, L.L.C.

Current Principal Place of Business:

C/O LILIAN SREDNI, PA
1380 NE MIAMI GARDENS DR., STE. 246
NORTH MIAMI BEACH, FL 33179

New Principal Place of Business:

19300 WEST DIXIE HIGHWAY
SUITE 12
NORTH MIAMI BEACH, FL 33180

Current Mailing Address:

C/O LILIAN SREDNI, PA
1380 NE MIAMI GARDENS DR., STE. 246
NORTH MIAMI BEACH, FL 33179

New Mailing Address:

FEI Number: 32-0137340 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LILIAN SREDNI, P.A.
1380 NE MIAMI GARDENS DRIVE, STE. 246
NORTH MIAMI BEACH, FL 33179 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: COIFFMAN, SANDRA
Address: 1380 NE MIAMI GARDENS DRIVE, STE. 246
City-St-Zip: NORTH MIAMI BEACH, FL 33179

ADDITIONS/CHANGES:

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 Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SANDRA COIFFMAN

MGRM

02/14/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date