

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000092261

FILED  
Feb 06, 2009  
Secretary of State

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

**Current Principal Place of Business:**

19300 WEST DIXIE HIGHWAY  
SUITE 2  
NORTH MIAMI BEACH, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

19300 WEST DIXIE HIGHWAY  
SUITE #2  
NORTH MIAMI BEACH, FL 33180

**New Mailing Address:**

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

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

LILIAN SREDNI, P.A.  
1400 NE MIAMI GARDENS DRIVE, STE. 208  
NORTH MIAMI BEACH, FL 33179 US

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

COIFFMAN-YOHROS, SANDRA  
19300 WEST DIXIE HWY  
SUITE 2  
NORTH MIAMI BEACH, FL 33180 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: SANDRA COIFFMAN-YOHROS      02/06/2009  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: COIFFMAN, SANDRA  
Address: 19300 WEST DIXIE HIGHWAY, SUITE #2  
City-St-Zip: NORTH MIAMI BEACH, FL 33180

**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 exemption stated in Chapter 119, 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-YOHROS      MGRM      02/06/2009  
\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date