

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000092261

FILED  
Apr 26, 2012  
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:**

COIFFMAN-YOHROS, SANDRA  
19300 WEST DIXIE HWY  
SUITE 2  
NORTH MIAMI BEACH, FL 33180 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/MANAGERS:**

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

I hereby 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      MGR      04/26/2012

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