2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L95000000398

FILED Apr 16, 2004 8:00 am Secretary of State 04-16-2004 90418 004 ****50.00

1. Entity Nam NORTH E	BROWAR	RD PREPARATORY	SCHOOLS, L.C.							
·			Mailing Address			[_			
1600 WEST COMMERCIAL BLVD. FT. LAUDERDALE, FL 33309			1600 WEST COMMERCIAL BLVD. Ft. Lauderdale, Fl 33309			24044547				
2. Principal Place of Business			3. Mailing Address			[
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03052004	Chg-LLC	CR2E08	3 (10/03)		
City & State		City & State			4. FEI Numbe 65-058				plied For t Applicable	
Zip	Country		Zip	Country		<u>L</u>	of Status Desired		5.00 Add ee Required	
6. Name and Address of Current Registered Agent					Name	7. Name and	Address of New	Registered A	gent	
CAMILLO, JOHN M ESQ. 1600 W. COMMERCIAL BLVD. FT. LAUDERDALE, FL 33309					Street Address (P.O. Box Number is Not Acceptable)					
FI. LAUDERDALE, FL 33309										
					City	Zip Code				
8. 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. I am familiar with, and accept the obligations of registered agent.										
SIGNATURE.	Signature typed	or printed name of registered agent an	d title if applicable (AVXI	E. Conistara	d Agent signature required	duction sale atalian		DATE		<u> </u>
	Cognitional, types	or printed having or regions as agont as	d and in application.	E. riegisioie	o Agent Signatore rectored	whom remajourg)		DATE		
Filing Fee is \$50.00 Due by May 1, 2004										
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	ue by Ma		S/MANAGERS	10.			Floric			
9. TITLE	MGRM	y 1, 2004 MANAGING MEMBER	S/MANAGERS	TITLE	· .		Floric	ia Departme		Addition
9	MGRM MORGAN	y 1, 2004		TITLE	· .		Floric	ia Departme	nt of State	
9. TITLE NAME	MGRM MORGAN 1600 W. C	MANAGING MEMBER		TITLE NAM STRE	E		Floric	ia Departme	nt of State	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MGRM MORGAN 1600 W. C FT. LAUD	MANAGING MEMBER MAN, PHILIP E COMMERCIAL BLVD. DERDALE, FL 33309		TITLE NAM STRE	EET ADDRESS -ST-ZIP		Floric	da Departme	nt of State	
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signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the vered to execute this report as required by Chapter 608, Florida Statutes. limited liability company or the receiver or trustee emp

4/,104 SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGER, MANAGER, OR AUTHORIZED REPRESENTATIVE