

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000007077

**Entity Name:** OVIDE DECROLY EDUCATIONAL CENTER, L.L.C.

**FILED**  
**Feb 19, 2013**  
**Secretary of State**  
**CC1961467906**

**Current Principal Place of Business:**

18851 NE 29TH AV  
SUITE 900  
AVENTURA, FL 33180

**Current Mailing Address:**

18851 NE 29TH AV  
SUITE 900  
AVENTURA, FL 33180

**FEI Number: 65-1100638**

**Certificate of Status Desired: No**

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

ROTH, LEONARDO A  
18851 NE 29TH AVENUE  
STE 900  
AVENTURA, 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent Date

**Authorized Person(s) Detail :**

Title MGRM  
Name CALLEROS GONZALEZ, ENRIQUETA  
Address 18851 NE 29TH AVE, SUITE 900  
City-State-Zip: AVENTURA FL 33180

Title MGRM  
Name MATUS CALLEROS, CLAUDIA  
Address 18851 NE 29TH AVE, SUITE 900  
City-State-Zip: AVENTURA FL 33180

Title MGRM  
Name MATUS CALLEROS, ALEJANDRA  
Address 18851 NE 29TH AVE, SUITE 900  
City-State-Zip: AVENTURA FL 33180

Title MGRM  
Name MATUS, EILEEN  
Address 18851 NE 29TH AVE, SUITE 900  
City-State-Zip: AVENTURA FL 33180

Title MGRM  
Name MATUS CALLEROS, FABIOLA  
Address 18851 NE 29TH AVE, SUITE 900  
City-State-Zip: AVENTURA FL 33180

Title MGRM  
Name MATUS CALLEROS, LUCIANO  
Address 18851 NE 29TH AVE, SUITE 900  
City-State-Zip: AVENTURA FL 33180

*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 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: MATUS CALLEROS , FABIOLA**

**MGRM**

**02/19/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

Date