

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000045700

**Entity Name:** PROMO PROFESSORS, LLC

**Current Principal Place of Business:**

11851 NW 30 PLACE  
SUNRISE, FL 33323

**Current Mailing Address:**

11851 NW 30 PLACE  
SUNRISE, FL 33323

**FEI Number:** 42-1610002

**Certificate of Status Desired:** No

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

RINEARSON, PENNYE  
11851 NW 30 PLACE  
SUNRISE, FL 33323 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	MGR	Title	MGR
Name	RINEARSON, PENNYE	Name	AXINN, SANDRA
Address	11851 NW 30 PLACE	Address	15120 MEADHAVEN ST
City-State-Zip:	SUNRISE FL 33323	City-State-Zip:	DAVIE FL 33331

*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:** PENNYE RINEARSON

**MANAGER**

**02/26/2013**

Electronic Signature of Signing Authorized Person(s) Detail

Date