

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000094810

Entity Name: 21ST CENTURY EDUCATIONAL SERVICES, LLC**Current Principal Place of Business:**999 PONCE DE LEON BLVD.
1110
CORAL GABLES, FL 33134**Current Mailing Address:**P.O. BOX 14-0970
CORAL GABLES, FL 33114 US**FEI Number:** 99-0378898**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PRATS FERNANDEZ & CO., P.A.
999 PONCE DE LEON BLVD.
1110
CORAL GABLES, FL 33134 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 FRESHILL INTERNATIONAL CORPORATION
Address P.O. BOX 14-0970
City-State-Zip: CORAL GABLES FL 33114

Title MGR
Name CARLINI, BRUNO V
Address P.O. BOX 14-0970
City-State-Zip: CORAL GABLES FL 33114

Title MGR
Name ROSAS, RENE GUSTAVO
Address P.O. BOX 14-0970
City-State-Zip: CORAL GABLES FL 33114

Title MANAGER
Name LEE, JUAN JOSE
Address P.O. BOX 14-0970
City-State-Zip: CORAL GABLES FL 33114

Title MANAGER
Name LEE, JUAN JOSE
Address P.O. BOX 14-0970
City-State-Zip: CORAL GABLES FL 33114

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

SIGNATURE: RENE GUSTAVO ROSAS BEST

MGR

04/09/2014

Electronic Signature of Signing Authorized Person(s) Detail_____
Date