

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000009503

FILED
Apr 11, 2005
Secretary of State

Entity Name: SALAZAR EDUCATIONAL TRAINING & CONSULTING SERVICES, L.L.C.

Current Principal Place of Business:

297 MEADOW BEAUTY TER.
SANFORD, FL 32771

New Principal Place of Business:

1086 WALNUT WOODS PLACE
LAKE MARY, FL 32746

Current Mailing Address:

PO BOX 950688
LAKE MARY, FL 32795

New Mailing Address:

FEI Number: 59-3725800

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BILLINGS, ROGER S
297 MEADOW BEAUTY TERRACE
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

BILLINGS, ROGER S
1086 WALNUT WOODS PLACE
LAKE MARY, FL 32746 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: ROGER S. BILLINGS

04/11/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: BILLINGS, ROGER S DR.
Address: 297 MEADOW BEAUTY TERRACE
City-St-Zip: SANFORD, FL 32771

Title: MGRM () Delete
Name: BILLINGS, FLOR M P
Address: 297 MEADOW BEAUTY TERRACE
City-St-Zip: SANFORD, FL 32771

Title: MGRM () Delete
Name: COGGINS, PATRICK C DR.
Address: 744 VASSAR RD
City-St-Zip: DELAND, FL 32724

Title: MGRM () Delete
Name: WHITE, EVA L MRS.
Address: 1708 NW 163 TERRACE
City-St-Zip: PEMBROKE PINES, FL 33028

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BILLINGS, ROGER S DR.
Address: 1086 WALNUT WOODS PLACE
City-St-Zip: LAKE MARY, FL 32746

Title: MGRM (X) Change () Addition
Name: BILLINGS, FLOR M P
Address: 1086 WALNUT WOODS PLACE
City-St-Zip: LAKE MARY, FL 32746

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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: ROGER S. BILLINGS

MGRM

04/11/2005

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