

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000014633

FILED
Apr 12, 2007
Secretary of State

Entity Name: NATIONAL YOUTH EDUCATION COUNCIL, L.L.C.

Current Principal Place of Business:

7040 W. PALMETTO PK RD
#4-293
BOCA RATON, FL 33433

New Principal Place of Business:

1515 S. FEDERAL HIGHWAY
SUITE 301
BOCA RATON, FL 33432

Current Mailing Address:

7040 W. PALMETTO PK RD
#4-293
BOCA RATON, FL 33433

New Mailing Address:

1515 S. FEDERAL HIGHWAY
SUITE 301
BOCA RATON, FL 33431

FEI Number: 65-1133195

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROTHSTEIN, SCOTT W ESQ.
300 LAS OLAS PLACE
300 SE 2ND STREET
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

ROTHSTEIN, SCOTT W ESQ.
401 EAST LAS OLAS BLVD
SUITE 1650
FORT LAUDERDALE, FL 33301 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:

04/12/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: NATIONAL EDUCATION C, OUNCIL INC.
Address: 7040 W. PALMETTO PK RD, #4-293
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: NATIONAL EDUCATION C, OUNCIL INC.
Address: 1515 S. FEDERAL HIGHWAY, SUITE 301
City-St-Zip: BOCA RATON, FL 33432

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: CHRIS M. SALAMONE

MGRM

04/12/2007

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