LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (LIBB)

FILED May 20, 2002 8:00 am

DOCUMENT # TOTAL T				Secretary of State	
DOCUMENT # L01000015515 →1. Entity Name				05-20-2002 90291 001 ***100.00	
Education Trading Systems LLC					
	DO NOT WRITE	IN THIS S	PACE	To the state of th	
2. Principal Place of Business 1801 S.W. 3rd Avenue		3. Mailing Address 2665 S. Bayshore Drive			
Suite, Apt. #, etc. 5th Floor		Suite, Apt. #, etc. Suite 703		DO NOT WRITE IN THIS SPACE	
Miami, Florida		City & State Miami, Florida		4. FEI Number	X Applied For
Zip 33129	Country USA	Zip 33133	Country USA	5. Certificate of Status Desired	\$5.00 Additional Fee Required
		e for at a discovery and	N	7. Name and Address of Current Regist	<u>`</u> .
DO NOT WRITE IN THIS SPACE			Name World Corporate Services, Inc. Sied Address Ro. Box Number is Not Acceptable) 703		
		i produktorojetali 20. gazaria 1. gazaria	City Miami,		FL Zip Code 33133
8. The above	e named entity submits this statement fo	r the purpose of changing		ered agent, or both, the State of Florida.	133133
SIGNATURE					-
	Signature, typed or printed name of registered agent are	id title if applicable.		OA:	ΓE
	·		FEE IS \$50.00 ayable to Department of DUE BY MAY 1	E State	
9.	MANAGING MEMBEI	RS/MANAGERS		STABLE VALENCE NAME OF	3484 (2-334) AGC NG 1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Manager Ricardo H. Goldman 1801 S.W. 3rd Avenue Miami, Florida 33129	, 5th Floor	TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	*		RAME STREET ADDRESS GITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CITY ST ZIP	DO NOT WR	TE .
TITLE NAME STREET ADDRESS			TITLE NAME STREET ADDRESS	IN THIS SPA	The state of the s

CITY - ST - ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; thatam 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 States.

NAME:

STREET ADDRESS

CITY-ST-ZIP

TITLE: \$ \$ NAME...

STREET ADDRESS

Ricardo H. Goldman 4/12/02 (305) 858-9900 **SIGNATURE**

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE