2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000002864

1. Entity Name

EDTÉCH INTERNATIONAL, LLC

FILED
Jan 12, 2007 08:00 AM
Secretary of State

Principal Place of Business 2114 N. FLAMINGO ROAD #1124

PEMBROKE PINES, FL 33028

Mailing Address

2114 N. FLAMINGO ROAD

#1124

PEMBROKE PINES, FL 33028



DO NOT WRITE IN THIS SPACE

01092007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 51-0430389

Applied For Not Applicable

5. Certificate_of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CUEVAS, ROGER C MR. 12353 SW 104 LANE MIAMI, FL 33186

DO NOT WRITE IN THIS SPACE

The above named entity submits this statement for the purpose of che the obligations of registered agent.	inging its registered office or registered agent, or both	in the State of Florida. I am familiar with, and accept
SIGNATURE_ Signature: typed or printed name of registered agent and title it applicable.	(NOTE, Registered Agent signature required when reinstating)	DATE

Filing Fee is \$50.00 Due by May 1, 2007

n	MANAGING MEMBERS/MANAGERS
9. HILE NAME STHEET ADDRESS CITY-ST-ZIP	MGR BAISMAN, OSCAR P.O BOX: 4544088 MIAMI, FL 33245
THEE MAME SHEET ADDRESS CITY-ST-ZIP	MGR CUEVAS, ROGER C 12353 SW 104 LANE MIAMI, FL 33186 _
NAME STREET ADDRESS CITY-ST-ZIP	MGR MATHOS, JOSEPH _ 1420 HIATUS PEMBROKE PINES, FL 33026
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
THE TAME STREET ADDRESS CATY-ST-ZIP	
NILE NAME STREET ADDRESS CITY-ST-ZIP	

U00000\$84838 01/12/07-80054-006 50.00

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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; 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

01/09/2007

Daytime Phone #