

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000004039

FILED
Mar 27, 2008
Secretary of State

Entity Name: OAK SCHOLAR OF BROWARD, L.L.C.

Current Principal Place of Business:

6035 SW 88 CT
MIAMI, FL 33173

New Principal Place of Business:

Current Mailing Address:

2121 PONCE DE LEON BLVD.
SUITE 240
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 02-0549629

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PRATS FERNANDEZ & CO, PA.
2121 PONCE DE LEON BLVD.
SUITE 240
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: PD () Delete
Name: HORMAZABAL, HUGO
Address: 6035 SW 88 CT
City-St-Zip: MIAMI, FL 33173

Title: SD () Delete
Name: CALDERON, GLADYS
Address: 6035 SW 88 CT
City-St-Zip: MIAMI, FL 33173

Title: D () Delete
Name: HORMAZABAL, GLADYS
Address: 6035 SW 88 CT
City-St-Zip: MIAMI, FL 33173

Title: DT () Delete
Name: HORMAZABAL, HUGO M
Address: 6035 SW 88 CT
City-St-Zip: MIAMI, FL 33173

Title: D () Delete
Name: HORMAZABAL, PAMELA
Address: 6035 SW 88 CT
City-St-Zip: MIAMI, FL 33173

ADDITIONS/CHANGES:

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

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

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

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 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: HUGO HORMAZABAL

PD

03/27/2008

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