2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000015057

Entity Name: PSYCHOLOGICAL EDUCATORS & CONSULTANTS, LLC

FILED Feb 13, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1522 SAN IGANCIO AVE NO. 1 MIAMI, FL 33146

Current Mailing Address: New Mailing Address:

1522 SAN IGANCIO AVE ST. I MIAMI, FL 33146

FEI Number: 03-0476513 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RODRIGUEZ, ALBERTO A
1200 BRICKELL AVENUE STE. 1680
MIAMI, FL 33131
US
GARCIA-LARRIEU, JOAQUIN A
10380 SW 115 ST.
MIAMI, FL 33176
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: JOAQUIN A. GARCIA-LARRIEU 02/13/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 SALADRIGAS, ELISA
 Name:

 Address:
 12353 NW 46 LN
 Address:

 City-St-Zip:
 MIAMI, FL 33178
 City-St-Zip:

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: GARCIA-LARRIEU, MARIA Name: GARCIA-LARRIEU, MARIA

 Name:
 GARCIA-LARRIEU, MARIA
 Name:
 GARCIA-LARRIEU, MARIA

 Address:
 1038 SW 115TH ST
 Address:
 10380 SW 115TH ST

 City-St-Zip:
 MIAMI, FL 36136
 City-St-Zip:
 MIAMI, FL 36176

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: MARIA GARCIA-LARRIEU MGRM 02/13/2005