2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED Aug 04, 2003 8:00 am Secretary of State 07-22-2003 90038 039 ****50.00

1. Entity Nam	MEN I # LUZUUUU RNING USA, L.L.C.						
Principal Place of Büsiness 220-71ST STREET SUITE 205 MIAMI BEACH FL 33141		Mailing Address 220-71ST STREET SUITE 205 MIAMI BEACH FL 33141		55053240			
2. Principal F	Place of Business	3. Malling Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		_	CHECK HERE IF	MAKING CHANGES	3
City & State		City & State		1 11- 000 111		applied For lot Applicable	
Zip	Country	Zip	Country	5. Certificate of		\$5.00 Ad	Iditional
	6. Name and Address of Current	Registered Agent		7. Name and A	ddress of New Regi		
			Name				
CLELIA-ANA 220-71ST STREET SUITE 205 MIAMI BEACH FL 33141			Street Address	Street Address (P.O. Box Number is Not Acceptable)			
			City			FL Zip Coo	le
	named entity submits this statement for ions of registered agent.				in the State of Florida		and accept
	Signature, typed or printed harne of negistered agent		: Registered Agent signature regult			DATE	
	-	Make Check Payable	WUNGEEAS, \$50.00 Novaloude Departm September 24, 2003	ent of State		·.' 1:.	اگر اهار دارد اهاری دارد
69(35.9)	MANAGING MEMBE	, TO (28 s - 1	10.	<u></u>	ADDITIONS/CH	IANGES	
TILE	MGRM .	☐ Delete	TITLE	······································		Change	☐ Addition
NAME STREET ADDRESS	VINCENTI, ANA CLELIA 220-71ST STREET SUITE 205		NAME Street Address				
CITY-ST-ZIP.	MIAMI BEACH FL 33141		CITY-ST-ZIP		·		
TITLE	MGRM	Delete	TITLE			☐ Change	Addition
NAME STREET ADDRESS	WIXTED, JOHN TIMOTHY 220-71ST STREET SUITE 205		NAME STREET ADDRESS				
CITY-ST-ZIP	MIAMI BEACH FL 33141		CITY-ST-ZIP				
TITLE NAME	MGRIM SANTIAGO, PATRICIO EDUAR	☐ Delete	TITLE NAME			☐ Change	Addition
TSTREET ADDRESS*	220-71ST-STREET-SUITE 205-	<u></u>	STREET ADDRESS CITY-ST-ZIP				
TITLE	MGRM	D'Delete	TITLE - · · · · · ·			Change	Addition
NAME STREET ADDRESS	VAN REES, MARIA FERNANDA 220-71ST STREET SUITE 205		NAME STREET ADDRESS				•
CITY-ST-ZIP	MIAMI BEACH FL 33141	•	CITY-ST-ZIP				
TITLE	MGRM	☐ Delete	TITLE	·		☐ Change	Addition
NAME	TIMMONS, VERONIAC		NAME			- •	_
STREET ADDRESS	220-71ST STREET SUITE 205		STREET ADDRESS			•	
CITY-ST-ZIP	MIAMI BEACH FL 33141	_ 	CITY-ST-ZIP				<u> </u>
TITLE NAME		☐ Delete	TITLE NAME			☐ Change	Addition
STREET ADORESS		•	STREET ADDRESS	•		1	ļ
CITY-ST-ZIP .			CITY-ST-ZIP			:	
11. I hereby c	ertify that the information supplied with on this report is true and accurate and pility company or the receiver or trustee	this filling does not qualify for that my signature shall have the empowered to execute this re	he exemption stated in S	ection 119.07(3)(i), F made under oath; th oter 608, Florida Stati	lorida Statutes. I furti at I am a managing utes.	her certify that the in member or manage	formation r of the

305 866 8121



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

July 24, 2003

EASY LEARNING USA, L.L.C. 220-71ST STREET SUITE 205 MIAMI BEACH, FL 33141 #L02000020093

Subject: -EASY-LEARNING-USA, L.L.C.

Reference Number:

L02000020093

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/RH ANNUAL REPORTS SECTION