

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000031682

FILED
Aug 11, 2005
Secretary of State

Entity Name: MAT TUTORIAL SERVICES, LLC

Current Principal Place of Business:

6005 NW 170TH TERRACE
MIAMI LAKES, FL 33015

New Principal Place of Business:

P.O.BOX 171371
HIALEAH, FL 33017

Current Mailing Address:

6005 NW 170TH TERRACE
MIAMI LAKES, FL 33015

New Mailing Address:

P.O.BOX 171371
HIALEAH, FL 33017

FEI Number: 51-0481248 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

THOMPSON, RUBEN T
166 NE 96TH STREET
MIAMI SHORES, FL 33138 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: MGRM () Delete
Name: ONONUJU, MAUREEN N
Address: 6005 NW 170TH TERRACE
City-St-Zip: MIAMI LAKES, FL 33015

Title: MGR () Delete
Name: MAXWELL, TERRY A
Address: 7900 NW 6TH STREET, UNIT 106
City-St-Zip: PEMBROKE PINES, FL 33024

Title: MGR (X) Delete
Name: POITIER, ARLEEN L
Address: 1284 NE 92ND STREET
City-St-Zip: MIAMI SHORES, FL 33138

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ONONUJU, MAUREEN N
Address: P.O.BOX 171371
City-St-Zip: HIALEAH, FL 33017

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 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: MAUREEN ONONUJU

MGRM

08/11/2005

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