

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000050574

**FILED**  
**Jan 15, 2006**  
**Secretary of State**

**Entity Name:** BILINGUAL EMPOWERMENT UNIVERSITY, LLC

**Current Principal Place of Business:**

7217 E. COLONIAL DR  
SUITE 111  
ORLANDO, FL 32807 US

**New Principal Place of Business:**

2230 STONINGTON AVE  
ORLANDO, FL 32817

**Current Mailing Address:**

P. O. BOX 678507  
ORLANDO, FL 32867 US

**New Mailing Address:**

P. O. BOX 677758  
ORLANDO, FL 32867 US

**FEI Number:** 73-1710178

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DOLLARLEASING AND MANAGEMENT, LLC  
7217 E. COLONIAL DR, SUITE 111  
ORLANDO, FL 32807 US

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

FIRST INVESTMENT NETWORK LLC  
2230 STONINGTON AVE  
ORLANDO, FL 32817 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: FIRST INVESTMENT NETWORK LLC

01/15/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: DOLLAR LEASING AND M, ANAGEMENT, LLC  
Address: 7217 E. COLONIAL DR, SUITE 111  
City-St-Zip: ORLANDO, FL 32807 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: FIRST INVESTMENT NET, WORK LLC  
Address: PO BOX 677758  
City-St-Zip: ORLANDO, FL 32807 US

I hereby certify that the information supplied with this filing does not qualify for the 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: FIRST INVESTMENT NETWORK LLC

MGR

01/15/2006

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