

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
May 31, 2005 8:00 am
Secretary of State

04-25-2005 90098 014 ****50.00

DOCUMENT # L04000070288			
1. Entity Name TOP OF THE CLASS TUTORING, LLC			
Principal Place of Business 5920 S.W. 58TH TERRACE MIAMI FL 33143 US		Mailing Address 339 MOUNT VERNON AVE C/O JENNIFER LEWIS, ESQ. ALEXANDRIA VA 22301	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FB Number 56-2480723		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
NRAI SERVICES, INC. 520 E PARK AVE TALLAHASSEE FL 32301 <i>2731 Executive Park Dr W</i> <i>Suite 4</i> <i>Weston, FL 33331</i>		<i>* SAME REG'D AGENT BUT NOTE</i> NEW ADDRESS Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____			
FILE NOW!!! FEE IS \$50.00 (Make Check Payable to Florida Department of State) Due By May 1, 2006			
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 606, Florida Statutes.			
SIGNATURE: <i>George K. Lewis Jr.</i>		Date: <i>4/21/05</i>	
1246		978.	