

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90030 026 ***138.75

DOCUMENT # L05000075257	
1. Entity Name MARISCAL AYACUCHO UNIVERSITY, L.L.C.	

60029416

Principal Place of Business 201 S BISCAYNE BLVD SUITE 2809 MIAMI, FL 33131	Mailing Address 201 S BISCAYNE BLVD SUITE 2809 MIAMI, FL 33131
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2. Principal Place of Business - No P.O. Box # 10395 NW 41 Street	3. Mailing Address 10395 NW 41 Street
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Suite, Apt. #, etc. Suite 100	Suite, Apt. #, etc. Suite 100
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04242008 Chg-LLC CR2E083 (12/06)

City & State Doral, Florida	City & State Doral, Florida
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4. FEI Number 20-3240823	Applied For ☐ Not Applicable
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Zip 33178	Country USA	Zip 33178	Country USA
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5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent FIGUEROA, JUAN A 1428 BRICKELL AVENUE, SUITE 208 MIAMI, FL 33131	
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7. Name and Address of New Registered Agent	
Name	
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 reinstating) DATE _____

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$638.75**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MAZA DUERTO, OCTAVIO 799 CRANDON BLVD., SUITE 601 KEY BISCAYNE, FL 33149 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MARTINEZ HIDALGO, LUIS E 452 GRAND CONCOURSE MIAMI SHORES, FL 33138 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MAZA DUERTO, ARISTIDES 799 CRANDON BLVD., SUITE 601 KEY BISCAYNE, FL 33149 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MAZA DUERTO, ORIANNA E 799 CRANDON BLVD., SUITE 601 KEY BISCAYNE, FL 33149 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 608, Florida Statutes.

SIGNATURE: *Oranna Maza* 4/22/08 786 331 1000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #