

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000012556

**FILED**  
**Jan 04, 2011**  
**Secretary of State**

**Entity Name:** HEALTH EDUCATION TRAINING SCHOOL, LLC

**Current Principal Place of Business:**

812 NE 125 ST.  
MIAMI, FL 33161

**New Principal Place of Business:**

**Current Mailing Address:**

812 NE 125 ST.  
MIAMI, FL 33161

**New Mailing Address:**

**FEI Number:** 20-4251845

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOSEPH, MARC MD  
12421 NE 6TH AVE.  
MIAMI, FL 33161 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: MGR  
Name: GAYOT, LUC  
Address: 812 NE 12 ST.  
City-St-Zip: MIAMI, FL 33161

I hereby 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: LUC GAYOT

MGR

01/04/2011

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