

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000039875

FILED  
May 08, 2007  
Secretary of State

**Entity Name:** CARPE DIEM ACADEMIA MANAGEMENT COMPANY LLC

**Current Principal Place of Business:**

15924 SW 92ND AVENUE  
PALMETTO BAY, FL 33157

**New Principal Place of Business:**

**Current Mailing Address:**

15924 SW 92ND AVENUE  
PALMETTO BAY, FL 33157

**New Mailing Address:**

**FEI Number:** 20-4717463      **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:**

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

TORRES, LISSA  
15924 SW 92ND AVENUE  
PALMETTO BAY, FL 33157      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: LOPEZ, ANA B  
Address: 15924 SW 92ND AVENUE  
City-St-Zip: PALMETTO BAY, FL 33157

Title: MGRM      ( ) Delete  
Name: RAMOS, JEANETTE  
Address: 15924 SW 92ND AVENUE  
City-St-Zip: PALMETTO BAY, FL 33157

Title: MGRM      ( ) Delete  
Name: TORRES, LISSA  
Address: 15924 SW 92ND AVENUE  
City-St-Zip: PALMETTO BAY, FL 33157

Title:      ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM      ( ) Change (X) Addition  
Name: NUNEZ, BLANCA  
Address: 15924 SW 92 AVE  
City-St-Zip: MIAMI, FL 33157

I hereby certify that the information supplied with this filing does not qualify 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: LISSA TORRES

MGRM

05/08/2007

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