

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000108978

FILED
May 29, 2008
Secretary of State

Entity Name: INTERNACIONAL VOLEI ACADEMY, LLC

Current Principal Place of Business:

10064 SOUTHERN PRIDE PLACE
LAKE WORTH, FL 33467 US

New Principal Place of Business:

6189 WINTER GARDEN - VINELAND ROAD
WINDERMERE, FL 34786 US

Current Mailing Address:

10064 SOUTHERN PRIDE PLACE
LAKE WORTH, FL 33467 US

New Mailing Address:

6189 WINTER GARDEN - VINELAND ROAD
WINDERMERE, FL 34786 US

FEI Number: 20-5873824 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:

ROCHA, MELINDA M
10064 SOUTHERN PRIDE PLACE
LAKE WORTH, FL 33467 US

Name and Address of New Registered Agent:

ROCHA, MELINDA M
6189 WINTER GARDEN - VINELAND ROAD
WINDERMERE, FL 34786 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: MELINDA M. ROCHA

05/29/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ROCHA, MELINDA M
Address: 10064 SOUTHERN PRIDE PLACE
City-St-Zip: WELLINGTON, FL 33467 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ROCHA, MELINDA M
Address: 6189 WINTER GARDEN - VINELAND ROAD
City-St-Zip: WINDERMERE, FL 34786 US

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: MELINDA M. ROCHA

MGRM

05/29/2008

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